



Agency of Human Services

Department of Disabilities, Aging and Independent Living

2013 Annual Report

January 2014

I am pleased to provide the Department of Disabilities, Aging and Independent Living Annual Report for State Fiscal Year 2013. The annual report describes the Department's work in carrying out its mission to make Vermont the best state in which to grow old or to live with a disability - with dignity, respect and independence.

In these pages, you'll meet some of the people who improved their lives with help from DAIL and our many community partners, find descriptions of our programs and primary activities under the federal Older Americans Act (OAA) and data on key measures. We hope this report makes clear that it takes the village to make our system work and we are grateful for the close collaboration with our partners.

Highlights include our year-long celebration of the 20th Anniversary of the closing of Brandon Training School; our continued efforts to help inform health care reform; our high rates of customer satisfaction across multiple divisions; meeting our goals in Choices for Care to provide choice, access, flexibility, quality, person-centered plans and continued success in rebalancing long-term care services, and, for the third year in a row, record highs in successful employment outcomes.

I am inspired daily by the commitment and dedication of DAIL staff, by the challenges and opportunities ahead of us and by the individuals we serve. Their stories, which are filled with pride, hope, joy and some sorrow, keep us committed to helping ensure all Vermonters have the opportunity to choose their paths and to live well with dignity, respect and independence, in connection with others and in their communities of choice.

A handwritten signature in black ink, reading "Susan Wehry". The signature is fluid and cursive, with a long horizontal line extending from the end.

Susan Wehry, M.D.
Commissioner

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Note: Data used in the DAIL Annual Report reflect both state (SFY) and federal (FFY) reporting periods and are indicated accordingly.

DAIL Mission

Making Vermont the best state in which to grow old or to live with a disability – with dignity, respect and independence.

Core Principles

- ***Person-centered*** – the individual will be at the core of all plans and services.
- ***Respect*** – individuals, families, providers and staff are treated with respect.
- ***Independence*** – the individual's personal and economic independence will be promoted.
- ***Choice*** – individuals will direct their own lives.
- ***Living well*** – the individual's services and supports will promote health and well-being.
- ***Contributing to the community*** – individuals are able to work, volunteer, and participate in local communities.
- ***Flexibility*** – individual needs will guide our actions.
- ***Effective and efficient*** – individuals' needs will be met in a timely and cost effective way.
- ***Collaboration*** – individuals will benefit from our partnerships with families, communities, providers, and other federal, state and local organizations.

Success Stories

These stories illustrate how DAIL serves individual Vermonters, and how individuals are ‘better off’ as a result. (Some names have been changed for confidentiality).

Vern

Vern, run over by a tractor when he was three years old, suffered a catastrophic Traumatic Brain Injury. The doctor told his family that if Vern survived, he was likely to spend the rest of his life in a vegetative state. Vern did survive, and with hard work and support from his family, grew into a 22 year old young man who enjoys working hard, being outside, and enjoying life. Vern came to our Division of Vocational Rehabilitation (DVR) with an infectious smile, a positive attitude, and a desire to work. He worked with a Transition Counselor and Employment Consultant to find a work experience at an indoor water park. This quickly led to Vern being hired, as the employer claimed that Vern had the best work ethic they had ever seen. When the season ended, the employer laid Vern off with assurances that he would have a job the next winter. However, Vern wanted to work year round, so DVR staff set up another work experience with the local Parks and Recreation Department. DVR provided On the Job Training funding to help Vern build additional skills. This employer was thrilled with Vern’s work, too, and Vern was offered a permanent, year-round position. After working 90 days, Vern came in to the DVR office to place a star on the office wall for his “successful closure.” When told he could put it anywhere he wanted, he jumped up and high-fived the wall at the very top!

Charles

Charles, a 43 year old man with quadriplegia, was residing in a local nursing home and expressed a desire to move into his own apartment. Staff from the Money Follows the Person (MFP) team, the Choices for Care program, Franklin County Home Health Agency, and other local providers supported him in pursuing this. With \$2,500 in MFP Transition Funds he was able to pay a rental deposit and to set up his pantry, allowing him to move into his own apartment. Charles is also working with the Vocational Rehabilitation Assistive Technology program to assess his needs for assistive technology supports.

Randy

Randy, self-advocate extraordinaire and president of Green Mountain Self-Advocates, works full time for Northwestern Counseling and Support Services (NCSS) where he coordinates self-advocacy activities and serves as an ally to the Next Step Self-Advocacy group, the local self-advocacy group; co-facilitates the Learning for Life Program, teaching independent living skills; provides peer advocacy to people who receive developmental disabilities services when they attend their team meetings; and, acts as a mediator. “Working at NCSS gives me a sense of purpose and I feel that I belong. Having a disability myself, I understand different learning styles and different perspectives.” “People with disabilities are capable of working beyond a cleaning capacity. There is a lot of talent out there that is not being used. Providing peer mentors is the way that services are heading.”

Michael

Michael is a retired farmer in his late 80’s who lives at home. He provides care to his wife, who has dementia. They have little contact with the outside world other than weekly participation in a Senior Meals program. One day last spring, Michael received a call from a stranger who was selling a ‘great business deal’, offering him an opportunity to invest in a business selling ATM machines. After several hours and a heavy marketing pitch, Michael was convinced that this was an opportunity he could not refuse. He was promised a ‘guaranteed’ return on his investment, which would supplement his limited Social Security income. The caller told Michael that all he needed to do to get in on the investment was to provide his personal credit card account information, which he did. Michael was left with almost \$30,000 in credit card charges, and no return on his investment. A few months later a report was made to Adult Protective Services (APS). The resulting investigation found that Michael was one of several victims in a multi-state ‘scam’. APS substantiated the allegations against the perpetrators, and assisted Michael in reversing the credit card charges.

Jane and Joe

Jane and Joe are in their late 80’s, and Joe has developmental disabilities. They live together in a rural, isolated setting and are suspicious of outsiders. Jane has served as Joe’s guardian for many years. Adult Protective Services received a report that Jane was neglecting Joe. The report indicated that Jane was abusive towards Joe and that he was unkempt, poorly clothed, and malnourished, with several untreated serious health conditions. The APS investigation found that Jane had a progressive dementia illness and was neglecting Joe’s needs as well as her own. APS assisted in transferring Joe’s guardianship to another person, relocating

him to another home, and setting up social and medical services. APS also provided support and referrals for Jane herself, as a guardian was also assigned to assist her.

Kyle

Kyle is a 26-year-old who wanted to go to college but had difficulty getting going at the Community College of Vermont. Kyle has had a variety of work experiences (e.g., food preparation, store clerk, cleaning, laborer, bookstore employee), but wanted to improve his education and get a better understanding of life. Kyle is now a 26 year old student at Southern Vermont College through the College STEP Program, which receives financial support from DAIL. The College STEP Program partners with developmental disabilities services agencies to provide campus-based direct educational support for people with developmental disabilities. *“Going to college will help me be more independent.”* The best part of college? *“I like the community and how the people are very well connected.”* The best part of College STEP? *“Everything! I can’t pick just one thing!”*

Jason and Andreas

One day in 2005, Jason answered Upper Valley Service's ad for a home provider/companion for Andreas. Though he had never worked in this field before, Jason had decided he wanted to make a difference in someone's life. He most certainly has! Andreas and Jason have been friends since that day over 8 years ago. Andreas and Jason both love live music, and their jobs with Higher Ground provide endless opportunities for concerts. Their favorite bands from around the country know and welcome Andreas at rock festivals and shows. Beyond the music world, Andreas and Jason are social beings with many friends, including former classmates from Andreas' school days. At regular 'game nights', Andreas throws the dice for the players. At Jason's wedding this summer, Andreas and his family shared in the ceremony and the celebration; Jason and Karen have declared their intention to be with Andreas for the rest of their lives. “There hasn’t ever been someone else into giving that like he has,” said Andreas, who communicates using supported typing. *“Sitting here typing this makes memories we have together. This is why I work so hard to say things in their special way to honor our connection with living together.”* TASH, a national nonprofit advocacy organization, awarded Jason and Andreas the 2013 Larry J. Brummond Supportive Relationship Award for their remarkable relationship.

Mark

“Eight years ago I began a writing project with Emily Anderson, Director of the Awareness Theater Company. What was intended to be a play became a wonderful

short movie called i am in here; a view of my daily life with good suggestions for improvement from my intelligent mind. It was no small feat as my autism makes it necessary for me to type to communicate. The people who assisted this project into reality have all experienced learning that I am much more intelligent than many presume. The movie continues to do this coupled with conversations I conduct with audiences after seeing the film. I am so much more present in my life as a result of this artistic use of supported typing. I intend to take the movie to schools and want to do more projects concerning communication."

Mary

Mary is an elderly woman who came to Vermont from another state to live in an apartment attached to her daughter's home. Mary needs substantial help with personal care including the use of a mechanical lift for transfers, assistance getting in and out of bed, an electric wheelchair for mobility, and careful monitoring of her insulin-dependent diabetes. Unfortunately, Mary's son-in-law (her primary caregiver) became ill, and her daughter was unable to provide care for her due to her own employment, and Mary moved into a nursing home. After living in the nursing home for several months, she expressed a desire to return to the community to live in an apartment of her own. Her family was worried that she would not succeed on her own due to her previous challenges in living alone. However, the Money Follows the Person program was able to support her move to her own apartment, including financial support in purchasing the furniture and equipment that she needed. Mary has been successfully living alone in her own apt for several months with a combination of services and supports including home health agency services, adult day services, and personal emergency response services.

Highlights from SFY2013

These highlights illustrate the Department of Disabilities, Aging, and Independent Living's (DAIL's) work to improve services and outcomes – typically in collaboration with the Agency of Human Services, other parts of State Government, and a wide variety of community partners.

Remembering Brandon Training School

2013 marked the 20th anniversary of the closing of the Brandon Training School (BTS), the only state institution for people with developmental disabilities in Vermont closed its doors after 78 years in operation on November 17th, 1993. The theme *Remember the Past, Celebrate the Present, Envision the Future* was selected to capture the importance of the rich history and promise of the Developmental Disabilities Act of 1996. Numerous individuals and organizations contributed to our recognition of this momentous occasion including a video about the history of the school which debuted at the State House for *Disability Awareness Day*; a photographic display from BTS and story-telling at Green Mountain Self-Advocates' *Voices and Choices* conference; collaboration with the Vermont Center for Independent Living on the *American's with Disabilities Act* celebration; and, partnering with the Compass Music and Arts Center in Brandon at the reception for their permanent exhibit *Remembering the Brandon Training School*. The story of the school's creation was retold through historic photographs and documents at the *Vermont State Archives*. Brandon Training School residents who had died were honored at the *Pine Hill Cemetery Memorial Dedication*. Lastly, at the final celebration in Killington, people shared their personal memories of life at the school; reminisced about what it took to close the school 20 years ago and what has been accomplished since then; and contemplated the challenges of today and tomorrow.

The 20th anniversary of the closing of Brandon Training School was also the impetus behind the BTS Oral History Project. Collaboration with the Vermont Folklife Center brought together 18 engaged individuals for a Community Memory and Passionate Listening Workshop. Since then, people have come together to tell their stories and share memories of what their lives were once like, and as importantly, what their lives are like today. Opportunities will continue to be made available to collect and record personal stories and recollections of people who once lived and worked at Brandon Training School.

Health Reform

DAIL staff has worked to improve the integration of long term services and supports (i.e., Choices for Care, Developmental Disabilities Services, Public Guardianship, Attendant Services and Traumatic Brain Injury Services) into Vermont health care reform and the Vermont health care system. Vermont was successful in securing federal funding for a large and significant payment reform testing grant (Vermont Health Care Integration Project, or VHCIP), and these grant activities have become the hub of Vermont's health reform efforts. DAIL staff actively support VHCIP in many areas including:

- Alignment of VHCIP with the DUAL Eligible Planning Grant work
- Inclusion of long term support service (LTSS) models in care and payment reform modelling;
- Inclusion of Employee Assistance Program;
- Promotion of person-centered and other LTSS performance measures
- Continued advocacy for technology resources through VHCIP to support Transitions of Care and improved individual outcomes
- Workforce development

Long term support services

DAIL has contributed to the ongoing transformation or evolution of long term support services in Vermont:

- Invested in Mental Health and Aging training and consultation, with increased funding for Elder Care Clinician services
- Participated in the development of business requirements for the Agency of Human Services Medicaid Management Information System procurement (MMIS replacement)
- Supported the Governor's Commission on Successful Aging. In SFY 13 the Commission identified three priority areas: 1) Promotion of Livable Communities; 2) Health Care Reform and Health Needs of Seniors; and 3) Improving involvement of mature workers in Vermont's workforce with a focus on retention, recruitment and hiring of mature workers. In SFY14 the Commission will advocate for specific actions related to these three areas.

New state hospital

In the fall of 2012, Division of Licensing and Protection (DLP) Survey and Certification staff worked with staff from the Vermont Department of Health to review the first initial state hospital license application in over 40 years. Because the new hospital would be operated by the Department of Mental Health (DMH), DLP staff worked closely with staff from DMH. The Board of Health voted to authorize the new state license. After a certificate of occupancy for the new

hospital was granted by the Division of Life Safety, DLP nurse surveyors conducted a walkthrough of the facility to assure that it was ready to receive patients. The collaborative efforts of several state agencies assured that this application process went smoothly. Early in 2013, the Green Mountain Psychiatric Center opened its doors, strengthening the capacity of the Vermont mental health system to provide high-quality inpatient mental health services to people with acute needs.

Healthy Eating as We Age

As the State Unit on Aging and Disabilities, DAIL is responsible for managing Older Americans Act nutrition services in Vermont. In SFY13, Central Vermont Council on Aging (CVCOA) successfully pursued additional private grant funding to continue their local foods initiative, *Healthy Eating as We Age*. *Healthy Eating As We Age* includes the creation of seasonal menus that include locally grown foods. Meal providers are provided with monetary incentives to increase their use of local foods. Of the menus created and prepared by CVCOA providers, 64% now include at least one local food item and 34% include two or more local food items. Meal sites also preserve fruits and vegetables during the harvest season for use during the winter and spring. Beyond stimulating appetites for healthy meals, the increased use of local foods has built relationships between farmers, meal providers, and seniors; supported the local economy; and helped to preserve Vermont's working agricultural landscape.

Public Education

Each October, the Division for the Blind and Visually Impaired (DBVI) and the Vermont Association for the Blind and Visually Impaired (VABVI) observe 'White Cane Safety Day' by sponsoring events across the state to heighten awareness of pedestrians' rights and to provide educational information. Attendees, including local and state officials along with other interested community members, participate in experiential learning of what it means to travel in their local community without sight. This is a powerful first-person experience that helps people understand life with vision loss, and what communities can do to support their community members with vision loss and other disabilities.

Adult Family Care

The Adult Services Division worked with stakeholders to develop a new Choices for Care home-based service called Adult Family Care (AFC). AFC is intended to provide person-centered 24-hour care to participants in a home environment that is safe, family oriented, and designed to support autonomy and maximize independence and dignity. Services are provided in the residence of a home

provider who provides care and support to no more than two people who are unrelated to the home provider. AFC launched in SFY2014.

PACE Vermont Closure

In December 2012, the Program for All-Inclusive Care for the Elderly (PACE) Vermont made the difficult decision to close. The two sites (Colchester and Rutland) were closed effective March 31, 2013. PACE Vermont worked closely with DAIL, Centers for Medicare and Medicaid Services (CMS), Champlain Valley Agency on Aging, Southwestern VT Council on Aging, the Visiting Nurse Association (VNA) of Chittenden/Grand Isle, and the Rutland Area VNA to transition all 140 participants to alternative services and supports. In an effort to learn from the closure, DAIL has contracted for qualitative research to investigate the reasons that PACE Vermont was unable to succeed. The results of this research will be available in SFY2014.

AHS Office of Child Support pilot

The Division of Vocational Rehabilitation (DVR) is in the second year of a pilot partnership with the Office of Child Support and Invest EAP called Work4Kids. Individuals who have been found to be in non-compliance of child support orders, and who indicate they are unable to obtain employment, are referred by the Court to Creative Workforce Solutions (CWS, an Agency of Human Services employment initiative facilitated by DVR) for assistance. Referrals are directed to a local Invest EAP Counselor who completes an initial intake, identifies barriers and service needs, and determines which CWS employment services are appropriate. Initial data indicates that 90-95% of referrals have significant barriers to employment, with a high percentage having one or more disabilities.

In a recent snapshot of payments by Work4Kids participants, employer-derived payments (the result of successful employment outcomes) were 5½ times higher for participants at the six-month mark than they were in the month prior to referral. This is a significant improvement and represents a more sustainable and consistent mechanism for meeting child support obligations. The Work4Kids project will continue in SFY2014, refining processes and gathering additional data.

Self-Neglect Initiative

In SFY13, DAIL issued grants to the five Area Agencies on Aging (AAA) to address the issue of self-neglect. The grants require the AAA's to conduct an assessment of the scope and nature of self-neglect in each of the AAA service areas. The Area Agencies on Aging worked with DAIL and Dr. Kelly Melekis from the UVM Department of Social Work to develop and administer a statewide

assessment of the scope and nature of self-neglect; the results of this assessment will be available in SFY2014. Following the assessment, the AAAs will construct plans for coordinated community responses to self-neglect including the development of a Self-neglect Risk/Safety Assessment Tool, and written agreements with community partners to provide relevant services to people who are self-neglecting. Each AAA will identify and serve at least 15 people who are self-neglecting, and will report additional outcome/performance measures.

DAIL Restructuring

In the second half of SFY13, DAIL embarked on a several month process to restructure the Division of Disabilities and Aging Services (DDAS) into two separate divisions: the Adult Services Division (ASD) and the Developmental Disabilities Services Division (DDSD) in order to better focus on performance and outcomes within each division. ASD is responsible for long-term services and supports for older Vermonters and adults with physical disabilities through Choices for Care (including the Money Follows the Person grant) and the Attendant Services Program. DDSD is responsible for developmental disabilities services, the Traumatic Brain Injury Program (TBI), and the Office of the Public Guardian (OPG). Both divisions continue to collaborate with other DAIL divisions, AHS departments, and expansive community provider networks.

Aging and Disability Service Networks

Older Americans Act Services

Older Americans Act (OAA) services are the backbone of Vermont's aging network for Vermonters age 60 and older. OAA funding supports a wide range of programs designed to help older Vermonters remain as independent as possible and to experience a high quality of life. At the local level, services are provided through Vermont's five Area Agencies on Aging (AAA). These include case management; nutrition services and programs; health promotion and disease prevention; information, referral and assistance; legal assistance; and family caregiver support. The Senior Community Service Employment program is managed through Vermont Associates for Training and Development. In FFY2012, 58,070 Vermonters over the age of 60 received services.

Nutrition

Nutrition is a major focus of DAIL. Two OAA-funded programs provide healthy meals and nutrition services for older adults: the congregate (or community) meals program and the home delivered meals program, also known as Meals on Wheels. These programs contribute to the food security of older adults and can play an important role in promoting good health, preventing disease, and lowering rates of disability, hospitalization, depression and mortality. Roughly 6% of Vermont senior households are food insecure, and the demand for senior meals is growing. Efforts are being made at the federal, state and local levels to strengthen and to develop innovations in nutrition services. In FFY2012,

- *4,592 Vermonters received home delivered meals*
- *11,646 Vermonters participated in community meals.*
- *772,229 meals were delivered to people's homes delivered*
- *390,081 congregate meals were served*

Senior Farmers' Market Nutrition Program

The Senior Farmers' Market Nutrition Program (SFMNP) connects income-eligible seniors with fresh, local produce through 'shares' in Community Supported Agriculture (CSA) farms. The United States Department of Agriculture (USDA) provides funding. In addition to receiving fresh produce, seniors have an opportunity to connect with other seniors and to develop relationships with the farmers who grow their food.

- *Vermonters served in FFY2013: 872*
- *Farms Participating in FFY2013: 21*

Commodity Supplemental Food Program

The Commodity Supplemental Food Program (CSFP) improves the health of income eligible adults over the age of 60 by supplementing their diets with nutritious USDA commodity foods. These foods include ultra-high temperature fluid milk, cereal, juice, rice, pasta, peanut butter, canned fruits and vegetables, and canned meat and fish. DAIL partners with the Vermont Foodbank, which screens and enrolls participants, manages caseload, and packs and distributes food.

- *Vermonters Served in FFY2013:* Approximately 3,300 on a monthly basis

Meals for Younger People with Disabilities

DAIL provides funds to the Vermont Center for Independent Living (VCIL) to provide home delivered meals for people with disabilities under the age of 60. Meals are provided to people who, because of their disability and/or chronic condition, are unable to provide their own meals and do not have meal preparation assistance available.

- *Vermonters Served in SFY2013:* 428
- *Meals Served in SFY2013:* 53,333

Aging and Disability Resource Connections

Vermont's Aging Disabilities Resource Connections (ADRC) initiative provides people of all ages, disabilities, and incomes with the information and support they need to make informed decisions about long term services and supports. ADRC builds on the infrastructure of ten 'core partners': the five Area Agencies on Aging (AAAs), the Vermont Center for Independent Living (VCIL), the Brain Injury Association of Vermont (BIAVT), Vermont 211, the Vermont Family Network (VFN) and Green Mountain Self-Advocates (GMSA). Vermont ADRC partners employ over 60 individuals who provide Options Counseling, based on national core competencies and job duties. ADRC also partners with the Veterans Administration Medical Center in White River Junction to serve veterans.

- *Vermonters Served in FFY2013:* ADRC Options Counseling (OC) Program served more than 1,000 individuals and caregivers/support persons.

In September 2012, DAIL was awarded a three year Enhanced Options Counseling Program grant, a competitive grant awarded to only eight states across the country. Vermont is helping shape the future of the ADRC and 'No Wrong Door' initiative for the nation. The National Options Counseling Training and Certification is supporting the development of core job duties and competencies, online curricula, catalog of courses, and options counseling standards. Over 60 qualified Options Counselors now work in nine core partner agencies. Vermont is also developing a project to determine the effectiveness and value of Options Counselors' roles in

streamlining individual access to long term care Medicaid. A pilot project will launch in January 2014 to determine the impact of Enhanced Options Counseling on streamlining access to long term care Medicaid.

Under the Veterans Independence Program, the Veteran-Directed Home and Community Based Program serves Veterans across the state. This is designed to support Veterans who might otherwise be in residential settings in their own homes.

- *Vermonters Served:* Since inception, about 45 Veterans have been served.

Family Caregiver Supports

Family caregivers are critical to the success of seniors and people with disabilities living in the community. The Alzheimer's Association estimates that in 2012 30,000 Vermont caregivers provided 34 million hours of unpaid care to people with dementia, with a value of \$416 million; this does not include caregiving for people with other diseases and conditions (*2013 Alzheimer's Disease Facts and Figures*) DAIL supports family caregivers through a number of activities including Dementia Respite Grants, the REACH OUT Project (Resources for Enhancing Alzheimer's Caregiver Health: Offering Useful Treatments), and support to Vermont Kin as Parents.

The Dementia Respite grant program is managed by Vermont's five Area Agencies on Aging. Dementia Respite Grants help family caregivers by reducing stress, maintaining their health, and continuing their caregiving roles. Grants may be used to pay for a range of services including in-home care, respite care, homemaker services, and Adult Day services.

- *Vermonters Served:*
 - Dementia Respite Grants in SFY2013: 268 family caregivers
 - National Family Caregiver Support Program in FFY2012: 513 family caregivers

Elder Care Clinician Services

The Elder Care Clinician program is a collaborative effort with the Vermont Department of Mental Health that provides mental health services to elders and caregivers. Elder care services are provided in both office and community settings. The most common problem areas are depression and difficulties in daily living, and women account for nearly 75% of the people served.

- *Vermonters Served in SFY13:* 510 people served

State Health Insurance Program

The State Health Insurance Program (SHIP) provides information, assistance and support to Medicare beneficiaries who need help selecting or managing public and/or private health insurance benefits.

- *Vermonters Served:* April 2012-March 2013: 14,671 contacts for assistance
- *Performance:* Vermont SHIP received a performance ranking of fifth among the 54 SHIP programs nationwide based on eight performance measure criteria.

State Long Term Care Ombudsman Program

DAIL contracts with Vermont Legal Aid to operate the Office of the State Long Term Care Ombudsman Program (SLTCOP). The SLTCOP is charged with protecting the safety, welfare and rights of Vermonters in nursing homes, residential care homes, and people using Choices for Care home and community-based services. An Ombudsman's primary responsibility is to investigate and resolve complaints on behalf of individuals. They also provide information and consultations to individuals, family members, providers, the public, and other community partners. Staff include a full time director (the State Long Term Care Ombudsman) and regional ombudsmen, located in five regional offices. A volunteer coordinator works with twelve certified volunteers, who are assigned to specific long term care facilities throughout the state.

- *Vermonters Served in FFY2013:*
 - Responded to 540 complaints (including approximately 19% related to home and community based services)
 - Provided 497 consultations to individuals and 206 consultations to providers of long term care services
- *Performance:* Approximately 80% of complaints were fully or partially resolved to the satisfaction of the individuals receiving services or someone with authority to act on their behalf.

Homeshare

DAIL supports two innovative Homeshare Programs in Vermont: HomeShare Vermont is active in Addison, Chittenden and Grand Isle Counties; HomeShare Now is active in Washington and Orange Counties. "Homesharing" arranges live-in 'matches' between Vermonters who have a living space to share and others who need a place to live and can offer support (such as personal care, housekeeping, and socialization). HomeShare Vermont also helps seniors and people with disabilities find paid caregivers to help them remain in their homes. The Homeshare Programs have been successful in helping people stay in their own homes, as well as in helping people find affordable housing.

- *Vermonters Served in SFY2013:*
 - In Home Share Matches: 207
 - In-home caregivers: 67
 - Affordable housing located: 141

Adult Services Division

802-871-3069
www.ddas.vermont.gov

Mission and Philosophy

The Adult Services Division (ASD) is responsible a full array of long-term services and supports for older Vermonters and adults with physical disabilities. ASD works with private organizations to provide a broad array of long term services and supports, including:

- Residential Support
- Community Supports
- Case Management
- Family Supports
- Respite
- Employment Supports
- Crisis Services
- Clinical Interventions
- Assistance with Activities of Daily Living
- Assistive Technology
- Personal Care
- Nursing Home Care
- Rehabilitation Services
- Support to Live at Home
- Information and Referral
- Integrated Health Care

The ASD supports older Vermonters and adults with physical disabilities to live as they choose, pursuing their individual goals and preferences within their chosen communities.

The Division:

- Seeks to ensure their basic human and civil rights, health, well-being and safety;
- Provides effective leadership for disability and aging policy and services in Vermont; and
- Meets federal and state mandates by developing and managing public resources effectively.

In SFY13, the Division continued to make strides in adopting a performance measurement system known as “results-based accountability” or RBA. Key staff were trained to lead our community partners in RBA outcome development. Moving into SFY14, RBA is scheduled to be engaged in areas that include adult day grants, nursing homes, and home and community based settings.

Organizational Structure and Staffing

The majority of staff works from regional offices around the state; central office staff and the Division Director are currently stationed in Williston. Staffing includes:

- Division Director
- Long Term Services and Supports program staff (19)
- Quality and Provider Relations staff (5)
- Money Follows the Person Grant staff (12)

The Division partners with a wide variety of local organizations, including:

- Adult Day Centers
- Area Agencies on Aging
- Designated Agencies and Specialized Services Agencies
- Home Health Agencies
- Nursing Homes
- Residential Care Homes
- Vermont Center for Independent Living

And with state and federal government entities, including:

- VT Agency of Human Services
 - Department of Vermont Health Access
 - Department for Children and Families
 - Department of Corrections
 - Department of Education
 - Department of Health
 - Department of Mental Health
- Administration on Aging/Administration for Community Living
- Centers for Medicare and Medicaid Services

Programs and Services

Adult Day Services

The Adult Services Division (ASD) is responsible for certifying 14 Adult Day providers across the state and for providing quality assurance and improvement support as needed. Eligible participants receive funding for Adult Day Services through the Choices for Care program or Medicaid Day Health Rehabilitation program. People also pay privately based on a sliding fee scale. Adult Day providers receive some limited state funding to support their core work. Adult Day

Services offer community-based non-residential supports to assist adults with physical and/or cognitive impairments to remain as active in their communities as possible. Adult day centers provide a safe, supportive environment where participants can come during the day and receive a range of professional health, social and therapeutic services, as well as a nutritious meal and valuable social interaction. Adult day services also provide respite, support and education to family members and caregivers.

- *Vermonters Served in SFY2013:* Vermont Medicaid supported an average of 481 people per month, as a total annual cost of \$6.5 million (27% Choices for Care Moderate Needs, 44% Choices for Care Highest/High Needs, and 29% Day Health Rehabilitation Services).
- *Performance: Vermont Long-Term Care Consumer Survey (February 2013)*
 - 97% of respondents rate the quality of services they received at the Adult Day Center they attend as excellent or good.
 - 85% of respondents agreed or strongly agreed that the Adult Day Center helped maintain or improve health.

Attendant Services Program

The Attendant Services Program (ASP) supports personal care services for adults with a “severe and permanent disability” who need physical assistance with activities of daily living (such as bathing, getting dressed and eating) to remain in their homes. In February 2013, the ASP regulations were updated to streamline eligibility determination processes that decrease wait times and increase participant confidentiality, strengthening the adequacy of this service. The adopted regulations also include an annual participant meeting, the first of which was in October 2013. The goal of the participant meeting is to relay program updates, obtain ongoing program feedback including staffing/training challenges, and to solicit volunteers for the ASP Advisory Committee. Information from participants will be used for program improvement activities.

- *Vermonters Served in SFY2013:* 182 people were served, including 93 people through Medicaid and 89 people with general funds (*Source: SAMS enrollment data*)
- *Performance: Vermont Long-Term Care Consumer Survey (February 2013)*
 - 100% of respondents rate the quality of services they received from the Attendant Services Program as excellent or good.
 - 92% of respondents agreed or strongly agreed that the Attendant Services Program helped maintain or improve health.

Choices for Care – 1115 Long-Term Care Demonstration Waiver

Choices for Care (CFC) is a Medicaid-funded long-term services and supports program that pays for care and support for older Vermonters and adults with physical disabilities. The overall goal of CFC is to give people choice and control over where and how their needs are met. For people who need nursing “home level of care”, services are provided in their own homes, in Residential Care/Assisted Living Homes, or in nursing facilities. Certified Home Health Agencies provide in-home services to many people. CFC offers a variety of self-directed options for people who live in their own homes who are able and willing to manage their own services, or who have a surrogate to manage services on their behalf. A new service option, Adult Family Care, was added to CFC in September 2013.

Choices for Care provides limited funding for homemaker, adult day and case management services to people in the “Moderate Needs Group” who do not need nursing home level of care, with the goal that by providing these services, it will prevent or delay the need for more costly long-term services and supports in the future. DAIL is currently working with partners and stakeholders to develop a new ‘flexible choices’ option for people in the Moderate Needs Group.

Choices for Care goals and performance:

- Serve more people: At the end of SFY2013, the total number of people served in Choices for Care was 4954, an increase of 159 people from the 4795 people served at the end of SFY2012.
- ‘Rebalance’ to serve more people in the community: A goal is to ‘shift the balance’, serving a lower number/percentage of people in nursing homes and a higher number/percentage of people in alternative settings, consistent with their individual choices. In SFY2013, the number of people served in nursing homes decreased while the number of people served in alternative settings increased:

Setting	June 2012	June 2013	Change
Nursing Home	2050	1961	-89
Total HCBS and ERC	1778	1965	+187
<i>HCBS</i>	<i>1384</i>	<i>1530</i>	<i>+146</i>
<i>ERC</i>	<i>394</i>	<i>435</i>	<i>+41</i>
HCBS Moderate Needs Group	967	1028	+61
TOTAL all settings and groups	4795	4954	+159

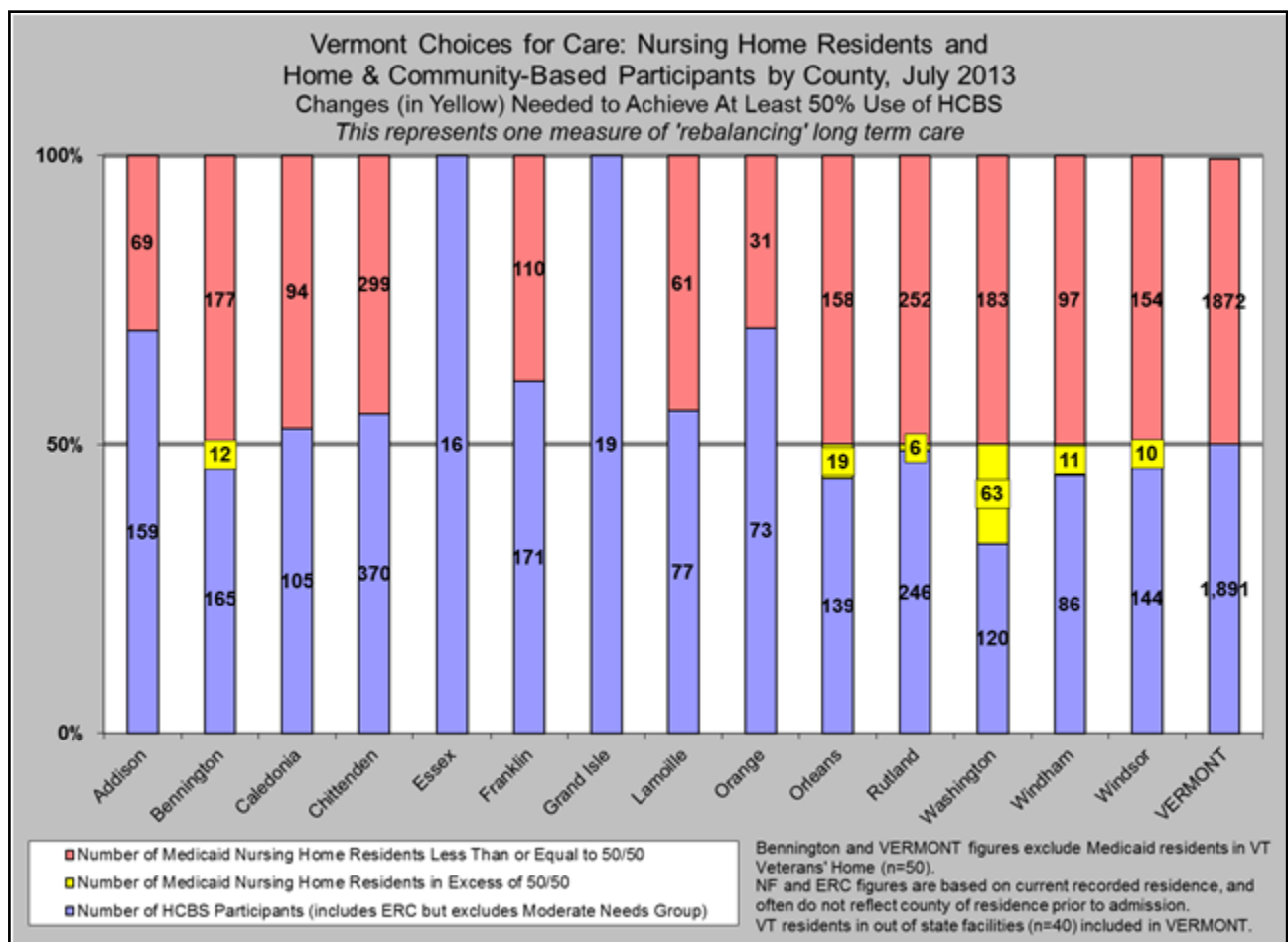
Data source: paid Medicaid claims by dates of service

- Increase service options: Choices for Care has added a flexible service option, which allows people in the High and Highest Needs Groups to use

funding more flexibly to meet their needs. DAIL is working on expanding this option to people in the Moderate Needs Group, and is also working on the implementation of Adult Family Care.

- Reduce waiting lists: In September 2005, 241 people were on waiting lists for home and community based services; at the end of SFY2013, this number was 0. (Neither number includes the Moderate Needs Group).
- Manage available funding: Another goal of CFC is to manage spending to the limits of available funding. Recent financial reports show that Choices for Care spending has been under budget, which has provided program stability as well as reinvestment opportunities. In SFY2013, expenses were \$6,005,391 (\$2,615,948 in General Funds) less than appropriated.
- Quality: Another goal is to provide high quality services:
 - 95% of respondents rated the quality of home-based Personal Care Services as excellent or good.
 - 88% of respondents agreed or strongly agreed that home-based Personal Care Services helped maintain or improve their health.

Data source: Vermont Long-Term Care Consumer Survey (February 2013)



Data source: SAMS enrollment database

Choices for Care Independent Evaluation

In May 2013, the University of Massachusetts Medical School (UMMS) evaluation team released its annual report. The report states:

“In this seventh year of the CFC program, DAIL continued to meet the needs of those Vermonters who need long-term support services. With the revision of the Evaluation Plan, the UMMS Evaluation Team is better able to assist DAIL by evaluating outcomes of CFC across the continuum of care settings. As with any far-reaching program, there are areas which can be improved. Based on the findings, UMMS has focused on several areas for potential enhancement. DAIL remains well positioned to meet the current and future needs of Vermont’s elders and adults with disabilities who use the CFC program.”

Based on the UMMS recommendations, DAIL is focusing on better meeting the needs of Moderate Needs Group by developing a flexible services option, coupled with increased funding to reduce the waiting list. This is also expected to increase the utilization of the Moderate Needs Group funding that is available. A second area of potential enhancement is in eligibility determination. DAIL staff are collaborating with DCF ESD staff to compare data and processes with the goal of improving access to services, despite current technological and economic constraints.

More information can be found at: <http://www.ddas.vermont.gov/ddas-publications/publications-cfc/evaluation-reports-consumer-surveys/cfc-evaluation-rpts-consumer-surveys>

Choices for Care Policy Brief

Due to the increasing prevalence of Alzheimer’s disease and related disorders (ADRD), DAIL asked the independent evaluation team at the University of Massachusetts Medical School to analyze the effectiveness of Choices for Care in providing services that meet the needs and preferences of eligible individuals with ADRD in all settings (nursing facilities, Enhanced Residential Care, and Home and Community-Based Services). In February 2013, the evaluation team (*Cheryl Cumings, M.A., Ioana Hartz, B.A., Kate Russell, M.A., and Laney Bruner-Canhoto, Ph.D., M.S.W., M.P.H*) published a policy brief with recommendations that will be used to inform program improvement efforts, including program expansion. The full report can be found at: <http://www.ddas.vermont.gov/ddas-publications/publications-cfc/evaluation-reports-consumer-surveys/cfc-adrc-policy-brief-feb-2103-2>

High Technology Home Care

High Technology Home Care provides skilled nursing care to people of any age living in home-based settings who are eligible for Medicaid and depend on medical technology to survive. Services include coordinating treatments, medical supplies, and sophisticated medical equipment. Adults age 21 and over who qualify are served through DAIL.

- *Vermonters Served in SFY2013:* An average of 38 people per month received Adult High Technology services. (*Source: Medicaid claims*)
- *Performance: Vermont Long-Term Care Consumer Survey (February 2013)*
 - 100% of respondents rate the quality of services they received from the High Technology Home Care services as excellent or good.
 - 52% of respondents agreed or strongly agreed that the High Technology Home Care services helped maintain or improve health.

Money Follows the Person Grant:

In 2011, DAIL was awarded a five year \$17.9 million ‘Money Follows the Person’ (MFP) grant from the Centers for Medicare and Medicaid Services (CMS). The goal of the MFP grant is to work in concert with the Choices for Care program to help people living in nursing facilities to overcome barriers that have prevented them from moving to their preferred community-based setting. In SFY2013, 960 people residing in nursing facilities received education on the services offered through MFP. These services offered include:

- Support during the transition by a Nurse Transition Coordinator
- Assistance from a Housing Specialist, if housing has been identified as a barrier to transition
- \$2,500 in Transition Funds to address barriers to transition

Of the 960 people educated in SFY2013, 88 people enrolled in the program, for a total of 130 people since MFP began. Many of those currently enrolled have identified housing as a barrier to transition. Choices for Care and MFP have focused on increasing housing options, including Adult Family Care and access to affordable housing.

- In SFY2013, 50 people residing in nursing facilities transitioned to a home and community based setting of their choice, and 16 people graduated from the program (graduation represents the successful completion of 365 days of living in a home setting). Since MFP began, a total of 72 participants have transitioned and 23 participants have graduated.
- For more information on the Money Follows the Person Grant, go to: <http://www.ddas.vermont.gov/ddas-projects/mfp/mfp>

Quality Management and Provider Relations

Quality Management and Provider Relations staff have oversight of certification activities for Choices for Care Providers. The team conducts onsite certification visits to Adult Day Providers, Home Health Agencies, and Area Agencies on Aging. The goal of the Quality and Program Management Unit is to assure that services are delivered in compliance with established standards. Certification visits give the Quality Staff a wonderful opportunity to meet Vermonters who participate in Choices for Care, and to use their perspectives in addressing quality. The team also offers technical consultation for continued quality improvement.

The Quality Unit participates in the Critical Incident Reporting system for the Money Follows the Person Program. The quality team reviews incident reports with program staff and offers consultation to providers in preventing incidents from recurring in the future.

The Quality Unit has incorporated the tenets of Result Based Accountability (RBA) in addressing quality and performance. The team offers consultation to providers in conducting RBA exercises to measure how people are better off as a result of their services. The team is currently evaluating all Adult Services Division grants and contracts to ensure that RBA standards are incorporated into services.

Wage Increase

In January 2013, DAIL increased wages for all Choices for Care and Attendant Services Program self-directed employees by \$.15/hour. This modest wage increase is intended to enhance recruitment and retention of staff by self-directed participants.

Consumer Satisfaction Survey

The 2012 Vermont Long-Term Care Consumer Survey was completed under contract by Market Decisions in February 2013.

Highlights:

“The results of survey suggest that the large majority of customers are satisfied with VT DAIL programs, satisfied with the services they receive, and consider the quality of these services to be excellent or good. The survey results are a clear indication that VT DAIL is in large part fulfilling its goal “to make Vermont the best state in which to grow old or to live with a disability ~ with dignity, respect and independence.” This high level of satisfaction continues a trend observed in the survey results since 2008. Based upon the views and attitudes of the large majority of customers, the survey results did not identify any major systemic problems with the programs and services provided by VT DAIL. VT DAIL is providing the services needed by

the vast majority of its customers in a manner that is effective, appropriate and that clients appreciate. The programs are viewed by customers as providing an important service that allows them to remain in their homes.”

- 90% of people rate the services they receive through DAIL programs as excellent or good.
- 93% of people rate the value of the services they receive as excellent or good.
- 90% of people rate the reliability of the people that help them as excellent or good.

Survey results will be used by the Department to inform program improvement efforts. The complete report can be seen at:

<http://www.ddas.vermont.gov/ddas-publications/publications-cfc/evaluation-reports-consumer-surveys/cfc-evaluation-rpts-consumer-surveys>.

Division of Blind and Visually Impaired

888-405-5005 Toll Free

888-405-5005

www.DBVI.vermont.gov

Mission and Philosophy

The Vermont Division for the Blind and Visually Impaired (DBVI) provides and oversees specialized services for people who are visually impaired using a rehabilitation model that starts when the person experiences vision loss. DBVI offers an array of services specifically designed for people who have lost visual function and independence.

DBVI's mission is to support the efforts of Vermonters who are blind or visually impaired to achieve or sustain their economic independence, self-reliance, and social integration to a level consistent with their interests, abilities and informed choices. Those who participate in DBVI services learn skills and become high achieving successful community members. Given appropriate adaptive technology and education, many limitations due to blindness can be overcome. Quality of life, dignity, and full integration are the focus of DBVI.

DBVI practices a rehabilitation model that takes a holistic approach to working with the individual at the time of vision loss. The process begins with the individual and the DBVI counselor working together to develop an individualized plan aimed at helping him or her to achieve the highest level of independence and employment as possible. The rehabilitative process focuses on helping the individual to learn new adaptive skills that allow them to regain independence and self-confidence after the severe trauma of vision loss. DBVI services help people reestablish control and ability to complete independent living tasks that are usually taken for granted, such as preparing breakfast, getting dressed and navigating familiar and unfamiliar areas at work and in the community.

Organizational Structure and Staffing

DBVI services are provided by highly qualified professionals who possess specialized training and understanding of the implications of visual loss. Services are provided from four regional field offices in Montpelier, Burlington, Springfield, and Rutland where rehabilitation counselors and associates are responsible for ensuring that timely and appropriate services are delivered to people with vision loss. One rehabilitation technology trainer covers the entire

state, teaching people how to use assistive technology such as screen readers and screen enlargement computer software. The director of DBVI is located in the Department's central office in Williston.

Programs and Services

Vocational Rehabilitation Services

The goal of DBVI's vocational rehabilitation services is to help people with vision loss to retain, return, or secure employment. Each individual meets with a DBVI counselor to identify goals and develop a plan to reduce the limitations that result from a vision loss. There were 70 people who met their employment goals. Some of the services provided in DBVI's vocational rehabilitation programs include:

- Counseling and guidance
- Assessment of skills, interests, and abilities
- Transition services for students
- Assistive technology equipment, evaluation and training
- Low vision services
- Orientation and mobility services (Learning to use a white cane)
- Rehabilitation training
- Career exploration
- Vocational training
- Assistance with post-secondary education
- Job-seeking skills
- Employer assistance
- Small business development
- Job placement services
- Coordination of services and access to programs

Transition Services

DBVI transition services provide high school students with opportunities for learning independent living and job skills. DBVI collaborates with several partners including the Division of Vocational Rehabilitation, Vermont Association for the Blind and Visually Impaired (VABVI), Vermont Youth Conservation Corps, ReSource, the Gibney Family Foundation and Linking Learning to Life.

One specific transition program called LEAP (Learn, Earn, and Prosper) provides paid summer employment for youth in a residential setting. This program empowers students to take charge of their employment future by gaining early

employment success that can be carried into future employment pursuits. The goal is for all graduates to either enter college, obtain further training, or join the world of work. A new addition to the summer work experience is the requirement for students to secure internships in their local community. The goal of the internships is to make the connections in the local community where jobs will eventually develop and to expand the summer experience into year-long career exploration. LEAP has completed its sixth successful year.

Independent Living Services

For those people for whom employment is not a feasible goal, but whose independence is challenged by vision loss, DBVI provides assistance in maintaining independence. The DBVI Rehabilitation Associate will meet with an individual in his or her own home to discuss the individual's goals and develop a plan for services to achieve the highest possible degree of independence. Plans may address activities such as traveling independently, preparing meals, and identifying medications. Once the individualized plan is developed, services are provided through a grant agreement with Vermont Association for the Blind and Visually Impaired (VABVI) which receives both federal and state funds from DAIL to provide services to adults over the age of 55 with visual impairments. Direct services include orientation and mobility, low vision training, and Rehabilitation Teaching.

- *Vermonters Served in FFY2013:* VABVI provided services to 826 adults with a visual impairment.

Technology

Maximizing the power of assistive technology is critical to people with vision loss.

DBVI invests significant effort in staying current about new assistive technology, which will revolutionize employment access and eliminate other barriers caused by vision loss. Assistive technology plays a critical role in allowing an individual with a visual impairment to be connected with society, continue employment, and pursue a tremendous range of careers in mainstream society.

Homemaker Services

Although the primary objective of DBVI is to enable people to work in competitive employment, including self-employment, occupations such as extended employment, homemaking, or unpaid family work may be an individual's most appropriate and acceptable choice.

Vermont results compared to national averages

Employment Rate

	<i>2009</i>	<i>2010</i>	<i>2011</i>	<i>2012</i>	<i>2013</i>	<i>National average 2012</i>
Total Number of People Receiving Services	108	111	90	88	84	
Total Number of People who Exited with Employment	75	81	69	68	70	
DBVI Employment Rate	69.44%	72.97%	76.67%	77.27%	83%	67.11%

Hourly Wage

	<i>2009</i>	<i>2010</i>	<i>2011</i>	<i>2012</i>	<i>2013</i>	<i>National average 2012</i>
Average hourly wage for competitive employment outcomes	\$12.65	\$17.43	\$13.71	\$15.04	\$15.38	\$14.17

Hours Worked

	<i>2008</i>	<i>2009</i>	<i>2010</i>	<i>2011</i>	<i>2012</i>	<i>2013</i>	<i>National average 2012</i>
Average hours worked for competitive employment outcomes	28.1	26.2	28.7	26.5	27.25	23.2	31.2

Customer Satisfaction

DBVI conducts a Customer Satisfaction Survey every three years. The last survey in SFY2011 showed a high level of satisfaction with DBVI services, with satisfaction rates exceeding 90% or greater in most areas- including:

- 92% were very satisfied or satisfied with DBVI's program.
- 92% of clients indicated that they were satisfied with the services they received.
- 89% of clients indicated that the services provided met their expectations.
- 90% of clients indicated that the services provided through the Vermont Division for the Blind and Visually Impaired compared favorably to the services offered through their ideal program.
- 98% percent of clients would tell their friends with similar disabilities to go to the Vermont Division for the Blind and Visually Impaired for help.

DBVI plans to repeat the Customer Satisfaction Survey in the spring of SFY2014.

Developmental Disabilities Services Division

802-871-3065
www.ddas.vermont.gov

Mission and Philosophy

The Development Disabilities Services Division (DDSD) (formerly part of DDAS) is responsible for services to people with developmental disabilities, traumatic brain injuries and guardianship services to adults with developmental disabilities services and older Vermonters. DDSD works with private organizations to provide a broad array of long term services and supports, including:

- Service Coordination
- Family Supports
- Community Supports
- Employment Supports
- Guardianship Services
- Residential Support
- Crisis Services
- Clinical Interventions
- Respite
- Rehabilitation Services

The Development Disabilities Services Division supports Vermonters with developmental disabilities to live as they choose, pursuing their individual goals and preferences within their chosen communities.

The Division:

- Seeks to ensure their basic human and civil rights, health, well-being and safety;
- Provides effective leadership for disability and aging policy and services in Vermont; and
- Meets federal and state mandates by developing and managing public resources effectively.

Organizational Structure and Staffing

The Developmental Disabilities Services Division (DDSD) plans, coordinates, administers, monitors, and evaluates state and federally funded services for individuals with developmental disabilities, traumatic brain injuries and their families within Vermont. The Division provides funding for services and is responsible for systems planning, technical assistance, training, quality assurance, program monitoring, and standards compliance. The Division also provides guardianship services on behalf of the Commissioner to individuals who are under court-ordered public guardianship.

The central office of the Division is currently in Williston, with the majority of staff working from regional offices around the state. Staff include:

- Division Director
- Administrative Staff (2)
- Senior Specialized Services Supervisor
- Developmental Disabilities Services Specialists (2)
- Public Safety Specialist
- Children's Specialist
- Supported Employment Coordinator
- Quality Management Team Administrator
- Quality Management Reviewers (2)
- Quality Management Nurse Reviewer/Traumatic Brain Injury Nurse
- Traumatic Brain Injury Program Supervisor
- Office of Public Guardian Staff (28)
- Program Development/Policy Analyst

The Division maintains partnerships with a wide variety of local service providers and other organizations, including:

- Brain Injury Association of Vermont (BIA-VT)
- Center on Disability and Community Inclusion/UVM (CDCI)
- Designated Agencies and Specialized Services Agencies (DA/SSA)
- Disability Rights Vermont (DR-VT)
- Green Mountain Self Advocates (GMSA)
- Support groups for people with brain injury
- Traumatic Brain Injury Service Providers (TBI)
- Vermont Center for Independent Living (VCIL)
- Vermont Coalition for Disability Rights (VCDR)
- Vermont Council of Developmental and Mental Health Services (VCDMHS)
- Vermont Developmental Disabilities Council (VT-DDC)
- Vermont Family Network (VFN)
- Vermont Legal Aid – Disability Law Project

The Division also has a variety of partners within state and federal government, including:

- Administration for Community Living (ACL)
- Adult Services Division (ASD)
- Agency of Education (AOE)
- Agency of Human Services (AHS)

- Centers for Medicare and Medicaid Services (CMS)
- Division of Licensing and Protection (DLP)
- Division of Vocational Rehabilitation (DVR)
- Department of Vermont Health Access (DVHA)
- Department for Children and Families (DCF)
- Department of Corrections (DOC)
- Department of Education (DOE)
- Department of Health
- Department of Mental Health

Programs and Services

Developmental Disabilities Home and Community Based Services

Developmental disabilities services help people and their families to increase independence and be part of their local communities. These services provide funding to prevent institutionalization and address personal health and safety as well as public safety. Opportunity for full community inclusion is paramount. Not only was Vermont the second state in the country to close its only institution for people with developmental disabilities, the last sheltered workshop closed more than ten years ago, and typical employment and other community activities became the norm. Services support people with developmental disabilities to live dignified lives and find opportunities for community participation through home supports, employment services, community supports, family supports, service coordination, crisis services, clinical interventions, and respite.

- *Vermonters Served in SFY2013:* 2,767 people receiving home and community-based services.
- *Employment services:* 1,088 people received supported employment services in SFY2013, with a 6% increase in number of people employed over the previous year. The average hourly rate of pay was \$9.26, well above the Vermont minimum wage.

Flexible Family Funding

Flexible Family Funding (FFF) helps to support unpaid families as caregivers for children and adults with developmental disabilities. Families receive up to \$1,000 per year which is used at the discretion of the family for services and supports that benefit the person and the family such as for respite, assistive technology and household needs.

- *Vermonters Served in SFY2013:* 1,080 people

- *Children:* 784 children under the age of 18 received Flexible Family Funding in SFY2013. Children made up 73% of FFF recipients.
- *Pervasive Developmental Disorder (PDD):* 424 (39%) individuals who received Flexible Family Funding in SFY2013 were identified as having Pervasive Developmental Disorder.

Public Guardian

The Office of Public Guardian (OPG) provides guardianship and other court-ordered supervision to people with developmental disabilities age 18 and older, and to Vermonters age 60 and older, when the person is unable to make basic life decisions and when there are no friends or family to serve as guardian. Services include guardianship services; representative payee services; case management; court-ordered evaluations for Probate and Family Court guardianship cases; public education on guardianship; and recruitment and support for private guardians.

DAIL was able to add a new guardian position based in the Northeast Kingdom. Previously, this large geographic area was served by guardians from the surrounding counties. This will greatly improve our ability to serve people who live in the northeast region of Vermont and increase the efficiency of guardianship services.

- *Vermonters Served in SFY2013:* 770 adults received guardianship services including 658 adults with developmental disabilities, mostly through Family Court, and 107 adults age 60 and over through Probate Court. 8 people received case management services.
- *Payee Services in SFY2013:* 331 adults received representative payee services.

Traumatic Brain Injury Program

The Traumatic Brain Injury (TBI) Program serves Vermonters with moderate to severe traumatic brain injuries, diverting or returning them from hospitals and facilities to community-based settings. This is rehabilitation-based and choice-driven, supporting people to achieve optimum independence and to return to work.

The TBI Program has a renewed focus on independent living, with increased emphasis on rehabilitation culminating in graduation from the TBI Program. DAIL has increased staff involvement in the field to provide technical support to providers and individuals receiving services. More active participation at quarterly team meetings has improved the focus on individual services and individual outcomes, resulting in both lower budgets and higher satisfaction among individuals and stakeholders. Partnership with Adult Services Division to transition

some people to Choices for Care long term services and supports will benefit those individuals who require ongoing long-term services while increasing the number of people who are served in the TBI Program.

- *Vermonters Served in SFY2013: 70 people.*

Other Highlights

Integrated Family Services Initiative (IFS): Integrated Family Services is an Agency of Human Services initiative with the goal of integrating services currently provided to children, youth and families through multiple departments to create a holistic, seamless system of service delivery. This is intended to improve outcomes while managing costs. This multi-year project blends services at the state and local level, and has involved DAIL's Deputy Commissioner and several Developmental Disabilities Services Division staff. Addison County became a pilot site for IFS in SFY2013; the Parent Child Center and the Counseling Services of Addison County have a combined contract to provide services to children and families in the region. Although still in the early stages, the providers report that the new structure has allowed for increased flexibility in services, and has created more opportunities for earlier interventions - before problems reach a crisis level. More pilot sites will be developed in SFY2014.

The Vermont Training Consortium: The Developmental Disabilities Services Division (DDSD) has maintained a Training Committee since 2009, when a full-time Training Coordinator position was eliminated. The Training Committee endeavors to maintain an understanding of state-wide resources and needs within developmental disabilities services agencies. In the summer of 2013 a group of agency Directors, clinicians and trainers gathered with DDSD staff, representatives from Green Mountain Self-Advocates, and the Director of the Vermont Crisis Prevention Network to address the emerging need for more consistent, sophisticated training of staff and service coordinators. Focus areas include the history and current intent of services, Social Role Valorization, inclusion, supervision, positive supports, and person-centered planning. The newly minted Vermont Training Consortium has committed to assuring long term, high quality training and supervision practices by gathering and sharing resource information; coordinating and promoting training in existing best practices; and developing a training curriculum that will serve as a standard for best and promising practices. The Consortium is currently negotiating commitments from stakeholders and intends to offer state-wide training starting in SFY2014.

Results Based Accountability: How are People Better Off?

Two performance measures are required by the Developmental Disabilities Services Division through Master Grants with provider agencies:

- **Access to Preventive/Ambulatory Health Services**

Access to primary care is associated with improved health, and is a HEDIS performance measure for health plans. The grant performance measure is defined as the percentage of recipients age 20 and older who have one or more annual preventive/ambulatory health services visits during the year.

- *Results* (CY2012): 88.3% accessed services

- **People with Developmental Disabilities who are Employed**

Employment is associated with higher income, increased social relationships, and improved health. The grant performance measure is defined as the percentage of recipients between the ages of age 18 and 65 who were employed in competitive employment during the year.

- *Results* (SFY2012): 46.4% employed

Division of Licensing and Protection

802-871-3317
www.dlp.vermont.gov

Mission and Philosophy

The mission of the Division of Licensing and Protection (DLP) is to ensure quality of care and quality of life to people receiving health care services from licensed or certified health care providers through the Survey and Certification (S&C) program, and to protect vulnerable adults from abuse, neglect, and exploitation through the Adult Protective Services program (APS).

Organizational Structure and Staffing

Survey and Certification (S&C): S&C is comprised of 14 home-based nurse surveyors. Surveyors are cross-trained in state and federal regulations that govern the health and safety standards for all licensed and/or certified health care facilities. The Assistant Director, the Complaint Coordinator, and the Licensing Chief are also federally qualified surveyors who respond to complaints and conduct survey activities when necessary. The Survey and Certification Program Technicians, Administrative Services Coordinator, and Administrative Services Manager all play important roles in assuring that regulatory activities occur as required. This includes timely data submissions, careful examination and processing of survey statements and license applications, and providing technical assistance to surveyors in the field.

Adult Protective Services (APS): APS has 14 staff: a Program Chief, Administrative Assistant, 2 Intake and Screening Program Specialists, 11 FTE Field-Based Investigators, and 2 half-time Field Supervisors. Investigators work cooperatively with local and state law enforcement when allegations rise to a criminal level. APS investigators rely on the Program Specialists and administrative support staff for accurate information and communication of complaints while in the field.

Programs and Services

Survey and Certification

Survey and Certification (S&C) is the Centers for Medicare and Medicaid Services (CMS) designated State Survey Agency. S&C provides regulatory oversight of health care facilities and agencies under state and federal regulations. S&C accomplishes this by conducting unannounced on-site visits both routinely and as a result of complaints received. Providers receiving regulatory oversight and/or periodic review include: Nursing Facilities, Residential Care Homes, Assisted Living Facilities, Therapeutic Care Residences, Home Health Agencies, Hospice Programs, Renal Dialysis Units, Ambulatory Surgical Centers, Rural Health Clinics, Acute Care Hospitals, Critical Access Hospitals, Portable X-Ray Units, Intermediate Care Facilities for those with Intellectual Disabilities, Federally Qualified Health Centers, Clinical Laboratories, and Rehabilitation or Psychiatric Units. The following types of providers are directly licensed by the survey and certification program: Nursing Facilities, Residential Care Homes, Assisted Living Residences, and Therapeutic Community Residences.

Other Highlights:

Consumer Friendly Website: S&C continues with the re-design of its website to ensure that those who receive services provided by health care facilities can access the most current survey results that are available. Since SFY11, all survey results for health care providers have been posted to the DLP website as soon as their plan of correction for deficient practice (if required) is found acceptable.

Antipsychotic Initiative: Nationwide awareness of the overuse of antipsychotic medications in nursing home residents, as well as community and other care settings, led many organizations to come together to reduce such over-use. S&C has worked on this issue with the Vermont Local Area Network of Excellence (LANE), which includes a strong majority of the Vermont Nursing Homes. The purpose of LANE is to assist Nursing Homes in improving resident care. Providers received education about non-pharmacological methods to address adverse behaviors of residents with dementia through in-person trainings on the OASIS program. All Centers for Medicare and Medicaid Services (CMS) certified nursing homes received a copy of a CMS resource titled Hand-in Hand. This resource is intended to assist nursing homes in providing quality care to residents with dementia. CMS set an initial nation-wide goal of reducing the inappropriate use of antipsychotic medications by 15%. Vermont exceeded that target with a reduction

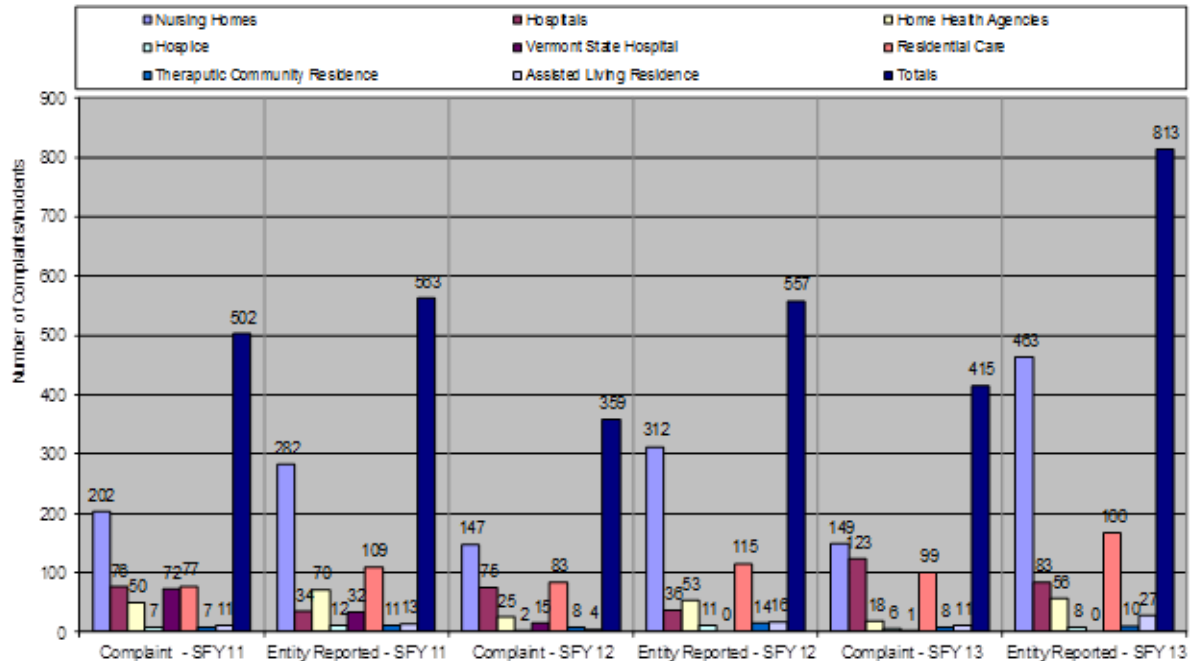
of 20.10% in SFY13. Additional work will continue in SFY2014 to further reduce the inappropriate use of antipsychotic medications.

Elder Justice Task Force: DLP continued to participate with the Vermont Elder Justice Task Force, promoting initiatives that assure safety and quality of care for older Vermonters. Members of the task force include the US Attorney's Office, the Medicaid Fraud Unit, the Office of Professional Regulation, the Office of the Chief Medical Examiner, the Long-term Care Ombudsman, and the local office of the Inspector General of the U.S. Department of Health and Human Services. The Task Force has collaborated with the Vermont Health Care Association (VHCA) regarding state-wide initiatives to reduce antipsychotic medication use in nursing homes. The Task Force also sent a letter to nursing homes urging them to examine their inappropriate use of antipsychotics.

Resident to Resident Incidents: One aspect of providing quality care to persons with dementia and related conditions is the need for processes that prevent harmful resident to resident incidents. Without robust systems in place, it is possible for residents to be seriously harmed by other residents. During SFY2013, S&C collaborated with VHCA to provide nursing home and residential care providers with information about the regulatory requirements in this area. S&C staff continue to provide technical assistance to providers, working to assure that they have strong systems in place to prevent harmful resident to resident incidents.

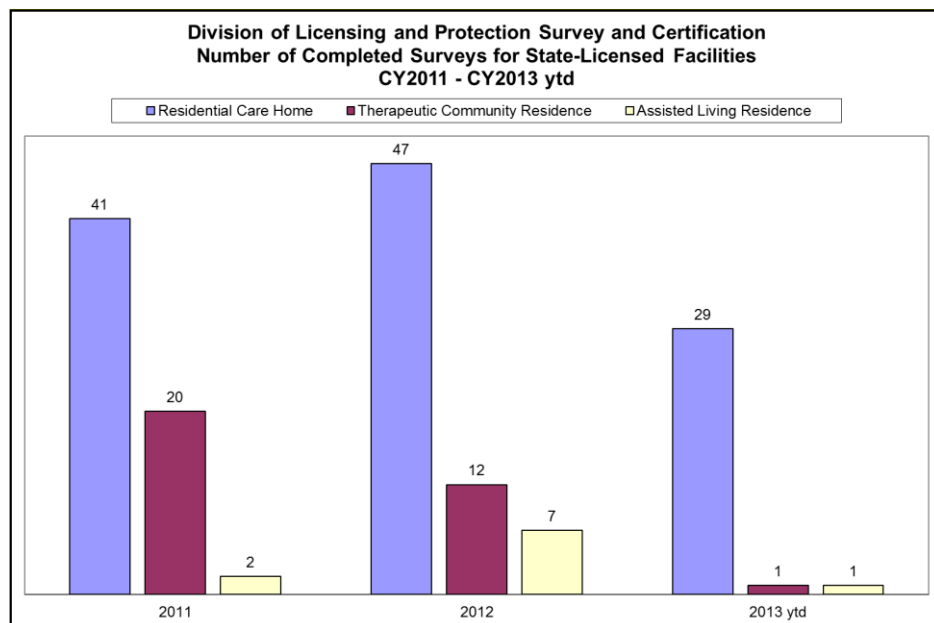
Responding to Complaints: SFY2013 brought an increased number of complaints and incident reports to S&C with a total of 1228, a significant increase from the SFY2012 total of 916. The Division of Licensing and Protection has been successful in responding within required timeframes to the most acute complaints, those that allege an immediate threat to the health and safety of people who receive health care. S&C has also made progress in responding to moderate and low level complaints in a timely manner.

Complaints & Incidents by Provider Type



Data Source: CMS ASPEN System

Surveys: In the recent past, due to staff vacancies and turnover, S&C fell behind in completing regularly scheduled onsite surveys of state-licensed residences. In SFY2013, staff retirements and resignations challenged the ability of S &C to maintain a 2-year survey cycle for these facilities; at one point during the year, five surveyor positions were impacted by turnover. All surveyor positions are now filled, and all new surveyors have completed the initial training. It is anticipated that this survey work will be completed in SFY2014.



Data Source: CMS ASPEN System

Adult Protective Services

Adult Protective Services is the unit of State government with primary responsibility for investigating allegations of abuse, neglect and exploitation of vulnerable adults under Title 33 of the Vermont Statutes.

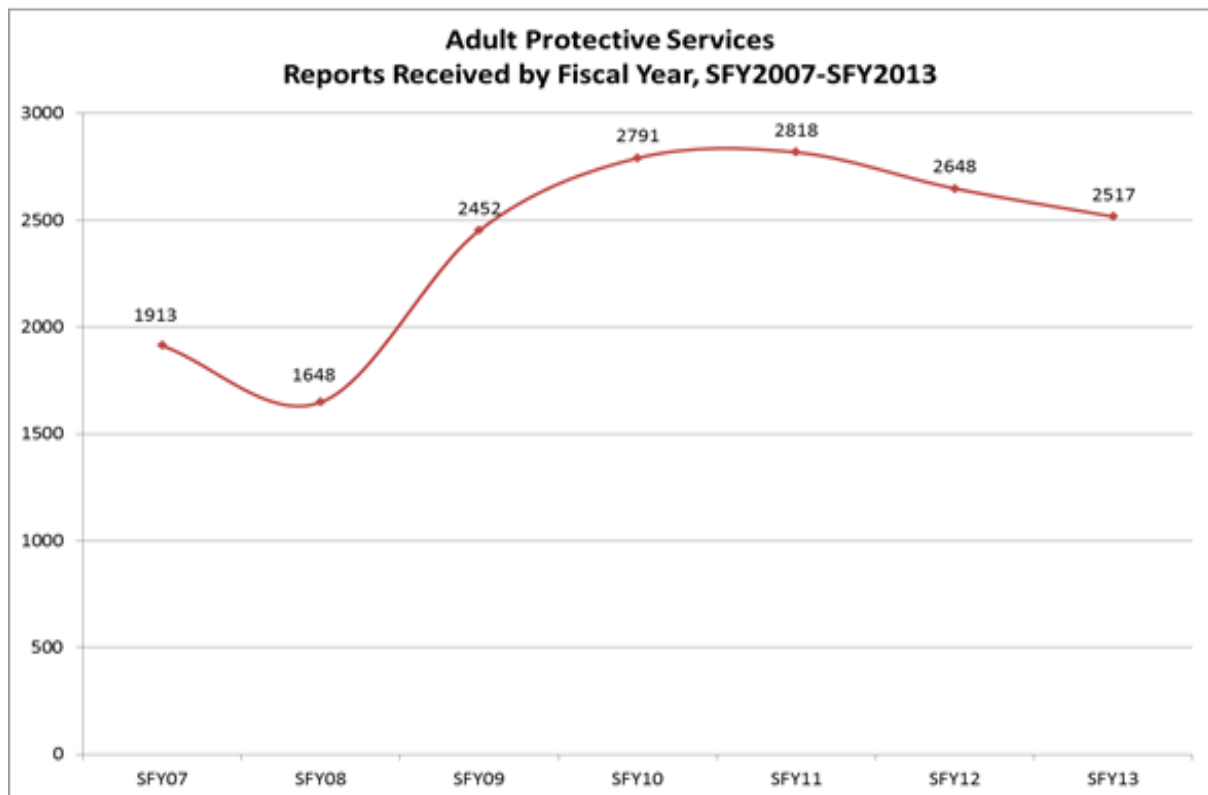
Intake, Screening and Investigations

The APS Program Specialists provide intake, screening and determination services for all reports of abuse, neglect and exploitation of vulnerable adults. They are the first point of contact for the public, whether mandated reporter or otherwise, when a report is made to the Division's reporting line. APS Reports typically come into the Division by one of three methods: direct telephone call to the toll-free number (800-564-1612); a written report via the APS Harmony Web-based Reporting form; or by Faxed Report. After a report has been received the Program Specialist enters the information into the Harmony management system, and then screens the Intake to make a determination as to disposition of the report. When a case is opened for investigation, the case is typically assigned to an APS Field Investigator in the region where the alleged victim resides.

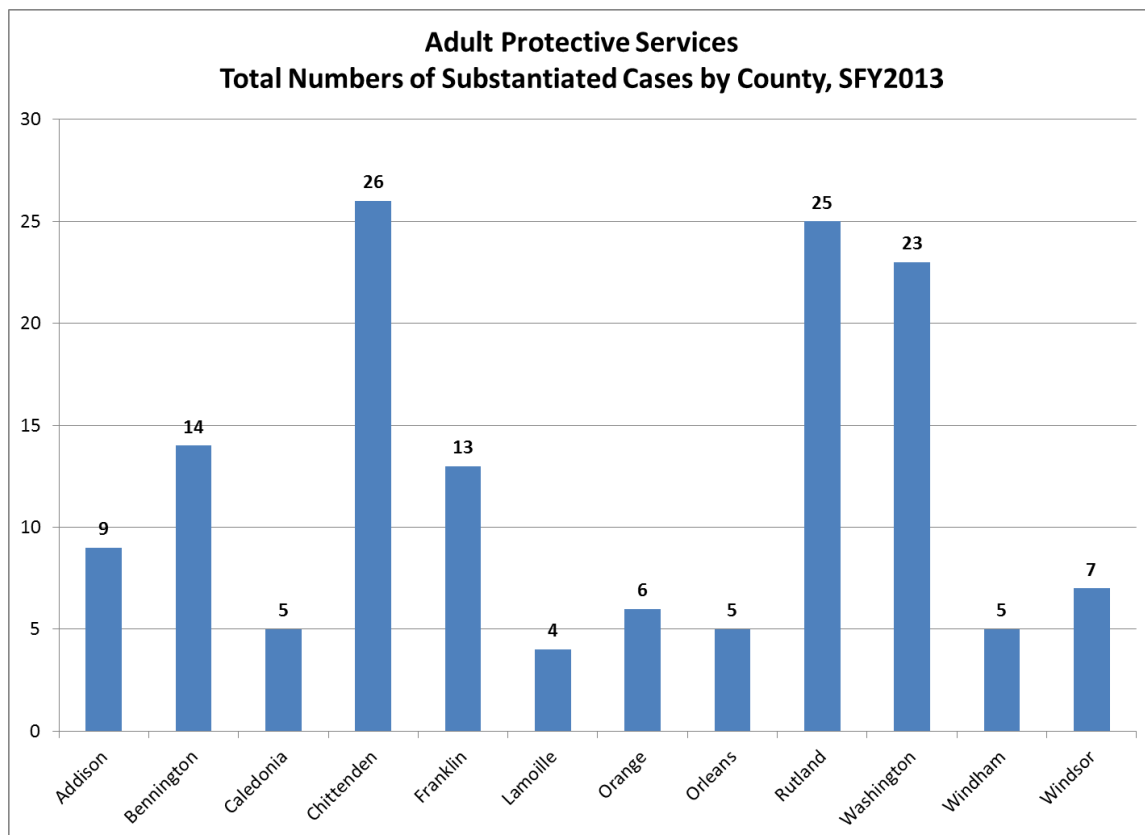
APS Program Specialists and Investigators work closely with many community-based partners and service providers when conducting investigations. These include, but are not limited to: area agencies on aging; home health agencies; the Attorney General's office; security officers of banking institutions; law enforcement personnel; staff from mental health and developmental disabilities programs; and personnel from licensed facilities. Building and maintaining cooperative partnerships with these and other organizations is essential in conducting timely investigations into allegations that a vulnerable adult has been abused, neglected or exploited, and in the timely delivery of protective services and supports.

The APS Field Investigators conduct investigations into allegations that a vulnerable adult has been abused, neglected or exploited and will work with the individual to plan for, refer to or provide protective services, when these services are necessary to assure the individual's safety.

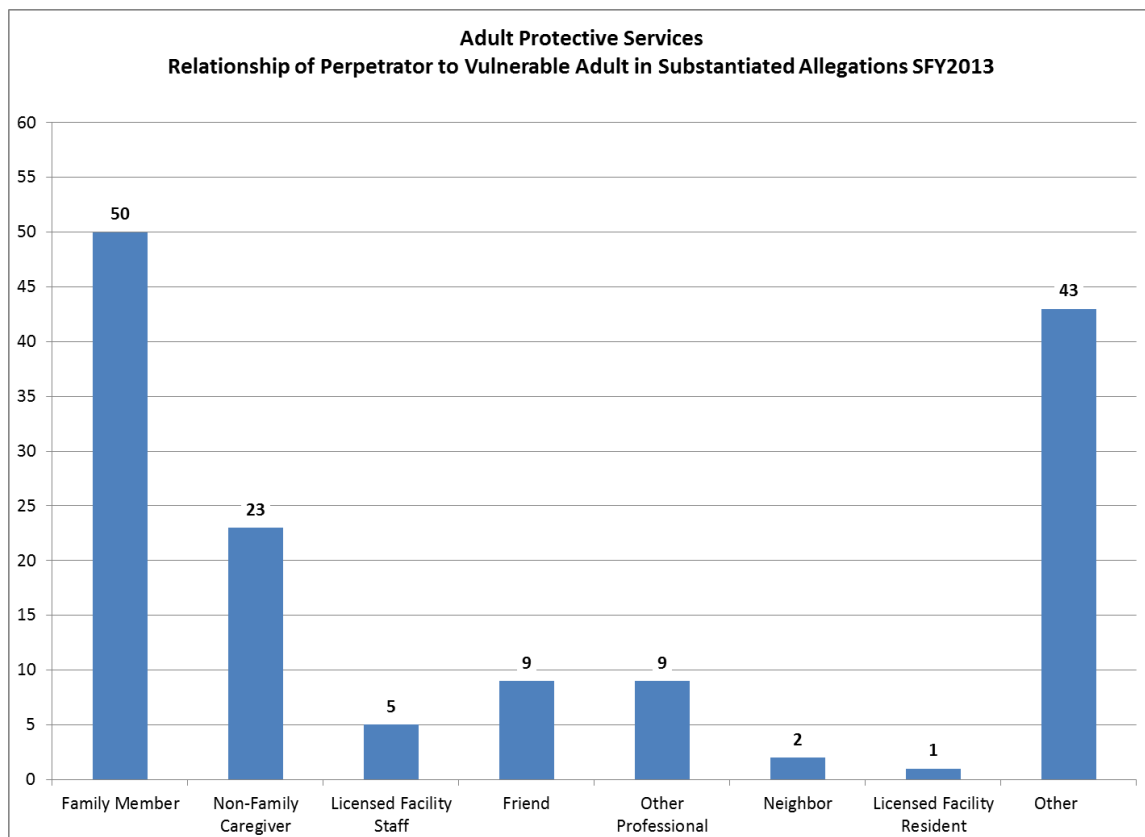
- *Vermonters Served:* The total number of reports of abuse, neglect and exploitation received by APS in SFY2013 was 2,517. APS recommended a substantiated finding in 107 investigations. Data is presented below and is also available in legislative reports at:
<http://www.dlp.vermont.gov/protection>



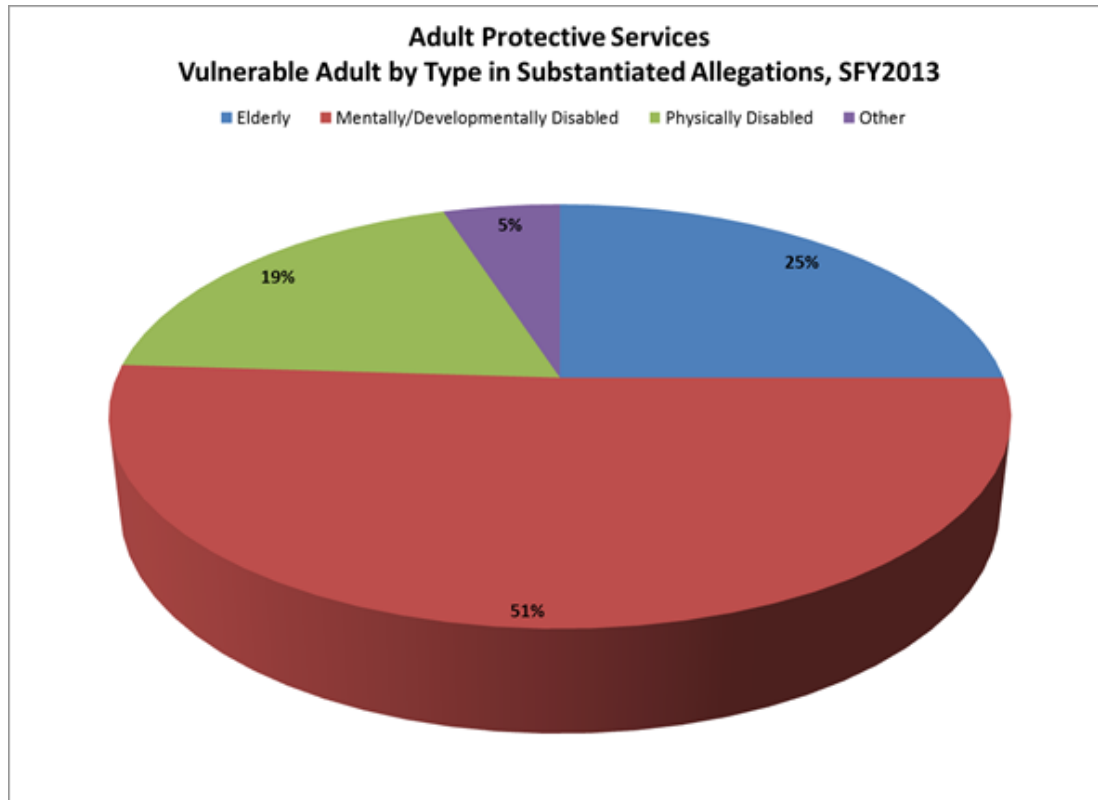
Data source: Harmony APS



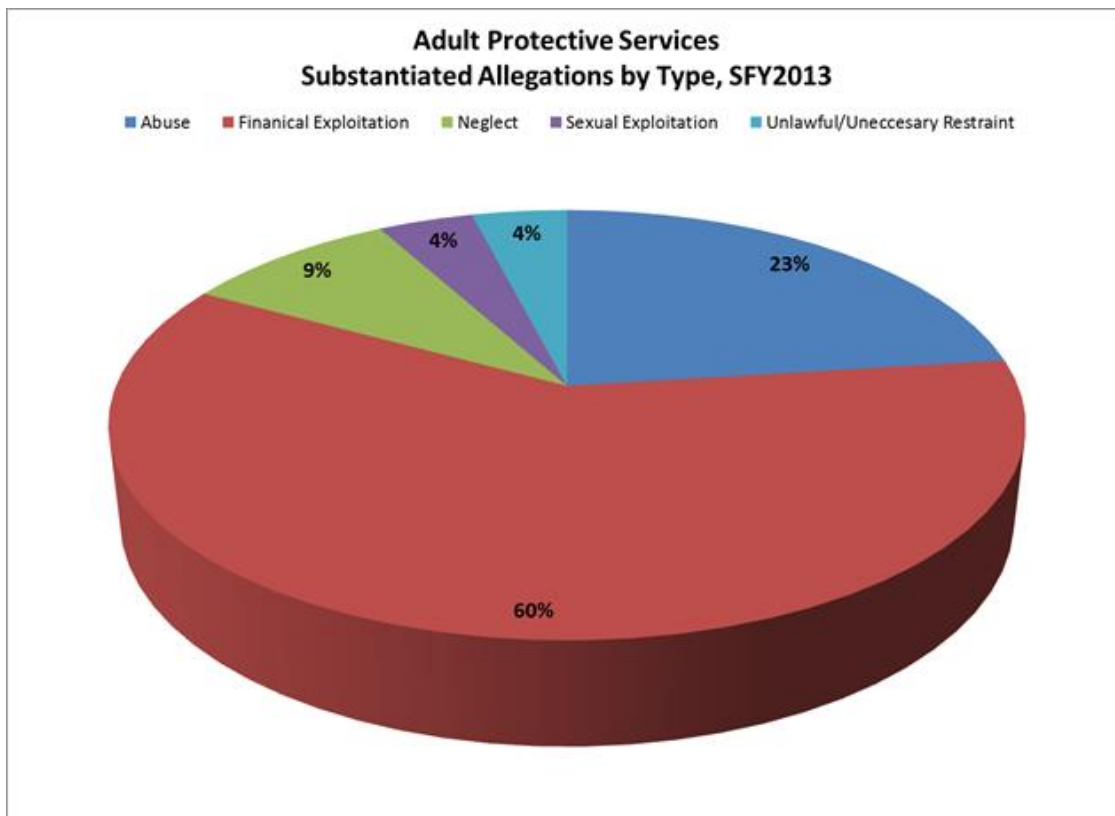
Data source: Harmony APS



Data source: Harmony APS



Data source: Harmony APS



Data source: Harmony APS

Protective Services

A key component of APS is ensuring that protective services and referrals are offered to the vulnerable adult - whether during an investigation or at case closure. Protective services may include information, referral and direct assistance such as filing for a temporary restraining order, or a more detailed and coordinated treatment plan. These services are as diverse as the individuals assisted by APS, and are developed with the vulnerable adult to address their needs and preferences. While the APS focus is on investigating allegation(s) of abuse, neglect or exploitation, protective service planning and delivery may include a variety of other services and referrals, including referrals to area agencies on aging, state and local law enforcement, the Office of Public Guardian, mental health and developmental service providers; securing protective services such as change of representative payee; connecting a vulnerable adult with case management or similar service provider; coordinating across social and health care systems of service to develop a system of ongoing supports post-investigation; filing a misuse of funds report with Social Security; petitioning for guardianship; f) conducting joint investigations with law enforcement; and filing Relief from Abuse Orders.

Adult Abuse Registry

APS is responsible for maintaining and managing the Vermont Adult Abuse Registry, which provides a confidential listing of individuals who have been substantiated for abuse, neglect or exploitation of a vulnerable adult. The Registry may be accessed by current or prospective employers of people who are or will work with vulnerable adults and/or children. The Registry is also used to screen volunteers. APS uses an on-line screening system to perform the Registry background checks on behalf of DLP/APS and the Department for Children and Families, when employers request a Registry check.

- *Vermonters Served in SFY2013:* APS completed 50,526 Registry checks. The Registry checks are completed for prospective or current employees, and provide a measure of protection at the ‘front end’ of the service delivery system that provides assistance to vulnerable Vermonters. The Registry check also provides a valuable service to employers by serving as a screening tool for employees- screening out individuals who have been substantiated for abuse, neglect and/or exploitation of a vulnerable adult.

Other Highlights

Community Outreach, Education and Training Programs:

- APS staff delivered thirty-five (35) education and training programs to a variety of organizations (945 participants), targeting agencies and people who deliver services to vulnerable adults in community, home-based and facility-based settings. The goal of the community education training program is to build participants’ knowledge and understanding of the Vulnerable Adult Statute (Title 33, Chapter 69) re: mandated reporting requirements, who is protected under the statute, the statutory definitions of abuse, neglect and exploitation, who is mandated to reporter and their responsibilities for reporting, and the APS program staff’s role in responding to reports of abuse, neglect or exploitation of a vulnerable adult.
- APS met with and sponsored outreach/education meetings with eighteen (18) community groups (regional and/or statewide entities) with 195 people participating. Our goal was to strengthen the APS relationship with participating agencies and staff in support of a collaborative approach to the prevention of and/or intervention in incidents of abuse, neglect or exploitation of vulnerable adults; and to share knowledge and expertise across systems of service to strengthen the statewide capacity to protect vulnerable adults from abuse, neglect and exploitation.

Financial Abuse Specialist Team (FAST): APS established the FAST (Financial Abuse Specialist Team), which grew out of the APS Financial Exploitation Unit. The FAST meets quarterly, is multi-disciplinary and provides members with an opportunity for case-specific consultation and sharing of information and resources; identification of new or evolving scams or other types of financial exploitation, providing alerts to other agencies. FAST has identified successful strategies for preventing and/or intervening in cases of financial exploitation of vulnerable adults. Members include personnel from APS, banking institutions, law enforcement, the Attorney General's office and social service agencies. APS strengthened relationships with law enforcement personnel and banking institutions with the founding of the FAST team. Through our field investigations we have reached out to collaborate with a variety of law-enforcement personnel and worked the Chittenden County States' Attorney to develop a cross-training and referral program to prevent financial exploitation. This can serve as a model for expansion into other regions of the state.

Harmony Database Solution: APS improved its business processes with the purchase of a Harmony Advanced Reporting (HAR) tool, implemented in February 2013. HAR produces complex data reports that serve as the primary management information tool, and also supports legislative requirements for monthly and quarterly reporting. This has strengthened APS business processes and identifies trends in program operations and service delivery from initial report through intake, screening, determination, investigation, substantiation, and appeals processes.

The Harmony reporting system has introduced a continuous quality improvement process.

Reporting: APS added one full-time Program Specialist to support Intake, Screening and reporting.

Web-Based Reporting Tool: In February 2013, Adult Protective Services implemented a web based reporting tool that has expanded access to reporting for both providers and members of the public, expanding timely online reporting of incidents of abuse, neglect or exploitation. We experienced a few technical difficulties in launching the report, which were short-lived and addressed quickly via technical assistance to users/providers. The new web-based report replaced an out dated reporting format; it provides confirmation to the reporter that the report has been submitted and offers the option of printing out the report at time of submission.

Week-End Intake/Screening Coverage: APS implemented week-end Program Specialist staffing in July 2012, to provide Sunday intake and screening of reports. This is in addition to the Department's Memo of Understanding with the Department of Children and Family Services (DCF) for weekend, holiday and after-hours Intake.

Division of Vocational Rehabilitation

802-871-3068

www.vocrehab.vermont.gov

Mission and Philosophy

The Division of Vocational Rehabilitation (DVR) serves people with disabilities in Vermont who face barriers to employment. DVR's mission is to help Vermonters with disabilities prepare for, obtain, and maintain meaningful employment and to help employers recruit, train and retain employees with disabilities. Consumer choice and self-direction are core values that drive DVR's approach to providing services and developing new programs. DVR also believes in collaborating with other service providers to reach people facing the greatest challenges to employment. As a result, DVR has created innovative partnerships to serve youth, offenders, veterans, people receiving public benefits, and those who need ongoing support in order to work.

DVR's ability to help jobseekers succeed in finding and keeping jobs hinges on how well DVR meets the needs of the employers. Realizing this, DVR revised its mission statement in 2008 to acknowledge employers as a dual customer of DVR services and began to transform how it interacted with employers. An important step was bringing employment staff from many different agencies together in local coalitions. The goal was to foster information-sharing on job opportunities among employment staff and streamline contacts with employers. This set the stage for Creative Workforce Solutions (CWS), an Agency of Human Services (AHS) initiative that builds on DVR's initial work and in which DVR plays an important facilitating role.

DVR views its commitment to consumer choice, innovative programs, and recognition of having dual customers as key to its high performance and high national rankings among VR programs.

Organizational Structure and Staffing

DVR delivers direct employment services to Vermonters and employers through 12 district field offices staffed by Masters-level Vocational Rehabilitation (VR) counselors. These counselors are supported by a team of business account managers, benefits counselors, case aides, and contracted employment consultants and Social Security specialists. DVR also houses the Vermont Assistive Technology Program and Invest EAP (Employee Assistance Program).

Programs and Services

Vocational Rehabilitation Services

DVR services to jobseekers are voluntary and free. Any Vermonter may be eligible if they have a disability that is a barrier to work and they need DVR services to become or remain employed. Services are tailored to the person and driven by his or her own interests, job goals and needs. Each person meets regularly with his or her VR counselor, who helps to develop an individualized plan for employment and manages the services and supports needed to realize his or her career goals. The core services of vocational assessment, counseling and guidance, job training, and placement provided by DVR staff and partners are enhanced with a range of purchased services and supports.

Placement Services

VR counselors have long benefitted from having dedicated employment staff to provide job development, placement and workplace supports to help people find and keep jobs. DVR has longstanding partnerships with all the Designated and Specialized Services Agencies that deliver community mental health and developmental services throughout Vermont to provide supported employment services to people with significant disabilities. DVR also has an ongoing partnership with Vermont Association of Business, Industry, and Rehabilitation (VABIR) to provide employment services to DVR customers. All of the programs funded by the Agency of Human Services are partners in the Creative Workforce Solutions (CWS) initiative. CWS also includes employment staff from the Vermont Department of Labor (VDOL) and Vermont Adult Learning (VAL) that serve Reach Up participants.

Employer Services

Employers are key customers of DVR and CWS services. When DVR and CWS work with jobseekers to assess their interests and skills, provide vocational training, and guide them towards promising job opportunities, employers benefit in the end. A unique service that DVR and CWS offer to employers is subsidized work trials, which minimize the risk to an employer in trying out a worker with a disability or other disadvantages. These “Progressive Employment” arrangements provide an opportunity for employers and jobseekers to work together toward a successful job match. These placements include several options, such as job shadows, work experiences, on-the-job training, and temp-to-hire models. Vermont businesses value the work DVR does to pre-screen and recommend qualified candidates, and give both a risk-free chance to test out a job. They also value the increased coordination and streamlining offered through CWS.

- *Performance:*
 - In a survey of businesses who have engaged in Progressive Employment activities, 88% feel it is a valuable tool for them.
 - For those individuals who secure employment after engaging in Progressive Employment, there is a 69% rehabilitation rate versus 58% for the overall VR caseload.
 - Of those who were placed after Progressive Employment activities, over half were hired by the business where they had done their work experience.

Other Support Services to Jobseekers and Employers

DVR capitalizes on its disability expertise and assessment skills in other ways to help Vermonters and employers. For people with disabilities who need additional stability in their lives before engaging in employment, DVR offers assistance with Social Security disability applications through its Social Security Administration (SSA) Application Assistance Program. And for those already receiving SSA disability benefits, DVR offers Benefits Counseling services to help beneficiaries overcome SSA disincentives to employment so they can return to work and reduce their reliance on public benefits. In addition, DVR is an important resource to employers for identifying valuable tax benefits, consulting on the Americans with Disabilities Act and workplace accessibility, and providing assistive technology and employee assistance program services to help employers retain workers with disabilities.

Vocational Rehabilitation Program: The DVR program continues to grow, as does the number of Vermonters with disabilities who are successfully employed each year, as a result of DVR services. After a brief dip in successful outcomes during FFY2009, DVR quickly rebounded and hit record highs the past two years.

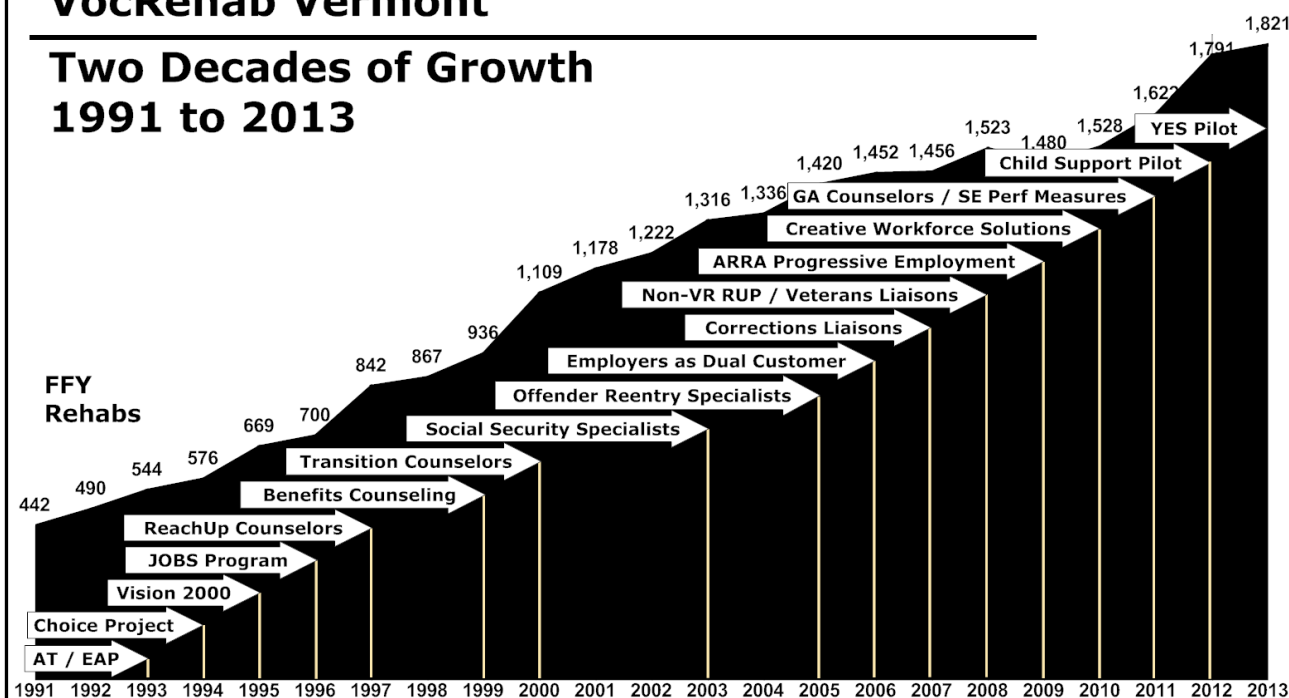
- *Vermonters Served in FFY2013:* 10,264 cases were open, serving 9,914 people.

Highlight:

- DVR had successful employment outcomes with 1,821 (58%) of the 3,153 individuals who closed their cases with DVR after having developed a plan for employment. This is 30 more rehabilitations than the prior FFY.

VocRehab Vermont

Two Decades of Growth 1991 to 2013



In addition to DVR's general Vocational Rehabilitation program, which includes everyone served by a VR counselor, DVR has special programs that extend or enhance these services to meet the unique needs of different populations.

Creative Workforce Solutions (CWS): CWS is a disability initiative designed to increase the number and variety of employers recruiting, hiring and promoting candidates with disabilities. VocRehab Vermont's focus on increasing employer outreach through the CWS initiative has resulted in ongoing relationships with over 1,600 businesses statewide. New contacts ranged from 150-200 per month, with the majority being face-to-face meetings with key decision makers. CWS Business Account Managers are dedicated full-time to developing relationships with employers in their communities. They work to identify workforce trends, negotiate Progressive Employment options, and act as a bridge to the business community for candidates with disabilities and Reach Up participants being served by AHS, including those served by DVR.

This increased connection to our business customer has resulted in many more opportunities for Vermonters with disabilities to explore careers, build skills and connect to businesses in their community. In SFY2013, a total of 4,729 "opportunities" were identified by CWS employment staff, ranging between 150 and 300 opportunities identified each month. For the purposes of tracking,

“opportunities” are broadly defined as any worksite experience offering candidates ways to build skills, gain experience and develop current references. Opportunities can include Progressive Employment options such as job shadows, company tours, time-limited work experiences and On-the-Job training arrangements. Open positions available for direct hire are also included in this category.

- *Vermonters Served in SFY2013:* 6,068 people received employment services with an open CWS case.

Supported Employment Program: DVR customers with significant disabilities sometimes need ongoing support to maintain employment in the competitive job market. In supported employment, a job coach helps the worker to learn or perform job duties. The coach can also help ensure ongoing success by arranging for transportation, assistive technology, special training, or tailored supervision. DVR contracts with roughly 40 programs in community-based mental health and developmental disability agencies for supported employment services to DVR customers.

- *Vermonters Served in FFY2013:* 1,451 people served with severe mental illness and behavioral disabilities, developmental disabilities, and traumatic brain injury.

- *Highlights:*

Performance-Based Contracts: Starting in SFY2012, DVR’s supported employment contracts have converted to performance-based contracts that set a consistent standard for employment across all programs. One element of performance measurement is the count of successful VR employment outcome (rehabilitations) for VR customers receiving supported employment through the contracted agencies. Successful Supported Employment outcomes increased significantly from SFY2011 to SFY2013. Developmental Services program outcomes increased from 142 to 226 VR rehabilitations and Community Rehabilitation and Treatment program outcomes increased from 85 to 143 VR rehabilitations in SFY2013. An additional element of performance measurement looks at the employment rate for the entire population served by each DS and CRT service provider, not just the individuals enrolled with DVR and getting supported employment. In this way, employment is promoted as an overall agency goal. There are bonuses for achieving high employment rates and penalties for failing to make adequate progress in meeting the standard.

Jump On Board for Success (JOBS) Program: The JOBS program is an innovative supported employment and intensive case management service for youth ages 16–21 with severe emotional difficulties that uses work as a means to engage this challenging population. These youth are out of school or at serious risk of dropping out and are also at high risk for involvement with Corrections, substance abuse, homelessness, physical abuse or abusive behaviors, or other concerning behaviors. JOBS programs in 14 sites offer career exploration and job placement; mental health treatment including substance abuse; and help completing high school education, learning independent living skills, and getting and keeping health insurance and housing.

- *Vermonters Served in FFY2013:* 485 youth under age 22
- *Highlight:*

Transition to Independence: Most JOBS programs staff statewide have completed TIP (Transition to Independence) Training and have been certified “TIP – informed”. TIP is an evidence-supported practice for youth and young adults with emotional and behavioral difficulties. TIP is based on numerous published studies that demonstrate improvement in real-life outcomes for these young people.

Youth in Transition Program: Since 2001, DVR has steadily expanded the availability of staff dedicated to serve youth. The initial focus was on developing DVR Transition Counselors to enhance outreach and integration with schools and provide the progressive work experiences (described in the employer services section of this report) and post-secondary educational opportunities youth need to succeed in the transition to adulthood. DVR Transition Counselors now serve all 60 Vermont high schools and typically focus on youth still in school and under age 21. DVR’s current emphasis is on expanding Youth Employment Specialists (YES) capacity. The YES provides intensive supports to youth and employers as they interact while the youth moves along the path from early career exploration, pre-employment training, work experiences, through to competitive job placement. DVR developed the Youth Employment Specialist (YES) model to improve integrated employment outcomes for transition age youth by providing job readiness, job development, job placement and job retention services. The vision is that all transition-age consumers will have gainful, competitive employment in a vocation of their choosing. YES are presently active in seven regions in Vermont. Each YES is assigned to a VR Transition Counselor and utilizes a dual customer approach - serving both youth in transition and employers. The YES introduces youth to the world of work using progressive employment (i.e. job shadowing, employer interview, short-term work experience, etc.) and serves as a liaison to employers to increase opportunities for work experiences and paid employment.

Outcomes to date include a 60% paid placement rate for transition-age consumers who work with YES and increased successful case closures (90 days of successful competitive employment). YES have also expanded employer networks and strengthened collaboration among VR partners.

- *Vermonters Served in FFY2013:* 3,197 youth opened cases; 2,103 were served by DVR Transition Counselors.
- *Highlight:* The Youth Employment Specialist (YES) initiative has begun to show improved employment outcomes for VR transition-aged youth. VR has increased the number of YES staff to 7 in this second year and the pilot continues to be evaluated by TransCen, a nationally recognized leader in youth transition services policy and research.

Reach Up Program: DVR has partnered with the Department for Children and Families (DCF) since 2001 to help Vermonters with disabilities receiving financial assistance under Reach Up, Vermont's Temporary Assistance to Needy Families (TANF) program. Recipients with a disability that is a barrier to employment are referred by DCF to DVR for services, where they are assigned to a specialized VR counselor who also serves as the person's Reach Up case manager. A single counselor then provides all services, blending the resources of both DVR and DCF to provide vocational services and case management. This DVR Counselor works collaboratively with a VABIR Employment & Training Specialist to engage a person in progressive employment activities that lead to competitive employment.

- *Vermonters Served:* 882 participants were served by specialty DVR Reach Up Counselors; 343 were served by general VR counselors.
- *Other grants:* As part of CWS, DVR continues to manage grants to all employment service providers serving any Reach Up participants with work requirements: VABIR, VT Department of Labor (VDOL), and Vermont Adult Learning (VAL). Referrals of Reach Up participants to VABIR, VDOL, and VAL are based on the type of progressive employment activity the person is able to engage in as a step toward financial self-sufficiency.
 - As CWS members, these providers worked with 1,148 people who were receiving a Reach Up grant to help them engage in competitive employment.

General Assistance (GA) Program: The DCF's GA program is intended to be an emergency source of basic needs support for people without dependent children. People must reapply every twenty eight days and document their inability to work. Unfortunately, many people come to rely on GA as an ongoing source of income (paid with 100% State General Funds), while they struggle with homelessness, undiagnosed or untreated disabilities, and extreme poverty. A few years ago, DCF

contracted with DVR's SSA Assistance Program to help GA participants apply for SSA disability benefits. Since February 2011, DVR has been providing counseling, guidance, and social security application assistance for Vermonters receiving ongoing General Assistance. GA is a small benefit that is paid with 100% State general funds to individuals with disabilities who do not have dependent children or any source of income or resources. It is an "empty pockets" program where consumers must reapply every 28 days. In the new system, applicants are required to go to DVR for their ongoing GA benefits where DVR provides vocational guidance and counseling; monthly GA eligibility determination and benefits issuance; referral and support for treatment; progressive employment opportunities; access to training, job search, placement, and retention services; and Social Security application assistance.

- *Vermonters Served in FFY2013:* 2,052 individuals
- *Performance:* Each month there was an average of 656 consumers actively receiving General Assistance benefits.
 - 1,396 people moved off from GA benefits through employment, other benefits, SSI or SSDI awards, were no longer eligible, etc.
 - 52 GA recipients were successfully employed for 90 days or longer.
 - On average, 465 consumers were engaged in employment related activities each month.
 - Approximately 270 people were receiving assistance with SSI or SSDI applications.
- *Savings:* When consumers apply for GA benefits they sign an agreement allowing ESD to recoup GA benefits issued if found eligible for SSI benefits. The recouped funds are returned to the General Fund. \$379, 237 was recouped, which helps fund services for others.

Offender Re-Entry Employment Services (ORES) Program: Employment is critical in helping ex-offenders successfully reenter their communities and avoid re-offending. DVR serves individuals with corrections backgrounds to assist them in finding jobs that will match their skills and interests. Designated VR counselors in each district office serve as a single point of contact for DOC. In addition, DVR has had a program in Burlington, jointly funded by DVR and DOC, to provide employment services to ex-offenders. The Employment Consultant runs group meetings with offenders with disabilities and provides information and support, working in collaboration with the Probation and Parole office.

- *Vermonters Served in FFY2013:* 757 people were served, referred to DVR through DOC staff or who were under DOC supervision. In addition, DVR provided grant funds to VT Works for Women to serve women with

correctional backgrounds and disabilities through the "Transitional Jobs Program" based in Barre.

- *Performance:* The Transitional Jobs Program run by VT Works for Women has had a very high success rate with this challenging population, placing 50 women into unsubsidized employment over the past 9 months.

Progressive Employment Program: Progressive Employment options such as job shadows, work experiences, on-the-job training, and temp-to-hire arrangements provide jobseekers and employers a chance to test out employment in a risk-free environment. Originally launched using American Recovery and Reinvestment Act (ARRA) funds, the program was so successful that DVR developed a set-aside fund to continue to offer this program to employers and DVR candidates. Since its inception in 2009, over 1,927 VR participants have engaged in Progressive Employment activities, resulting in more than 840 successful employment outcomes.

While securing employment is certainly a primary outcome for the use of Progressive Employment, it is also being used to identify career options, assess skills, acquire new skills and establish recent references and experience. The key to the program is its flexibility and focus on meeting the needs of both the candidate and the employer. Employment Consultants work to identify opportunities that will help candidates become more competitive in the labor market, while at the same time allowing employers the time to assess a candidate prior to making a hiring decision.

Highlight:

A preliminary independent evaluation of DVR's Progressive Employment program found that total earnings of participants were about three times those of nonparticipants with similar characteristics—a difference resulting from two outcomes: nearly twice as many program participants were employed during this study period and, among the people who were employed, earnings were about 60% percent higher than those of non-participants.

Research:

DVR and the Institute for Community Inclusion at the University of Massachusetts in Boston have been awarded a 5-year research grant from the National Institute on Disability and Rehabilitation Research (NIDRR) to establish Progressive Employment as an evidence-based practice in VR. DVR staff will be working with four states to develop and implement the Vermont model and will work closely with ICI to study the effectiveness of Progressive Employment as it is launched in those states. In SFY2014, DVR staff will be

piloting the research design phase of the project in partnership with Nebraska's Division of Vocational Rehabilitation. The pilot will examine feasibility of research designs, implementation strategies and data collection approaches. Information from the pilot will inform the full research design for the ensuing four-state project, which is slated to begin in SFY2015.

Social Security Application Assistance Program: People with disabilities that are serious enough to qualify for Social Security disability benefits often rely on other benefits such as Reach Up and General Assistance because the Social Security Administration (SSA) application process is onerous and denials are common. Shifting these people to SSA benefits brings greater income stability and access to health care benefits that can be a critical foundation for eventual movement into employment. It also preserves state resources for those who have no other option than Reach Up and General Assistance. In fact, the state can be reimbursed by SSA for benefits paid out by General Assistance if the person is found eligible for SSA benefits for the same period.

In working with Reach Up, General Assistance, and offender populations, DVR has found many people with severe disabilities that have never been properly diagnosed or treated. While employment is the goal, it may not be a viable option yet. Stability comes first. To address this need, DVR joined with the Social Security Administration, the Department of Corrections and the Department for Children and Families to create a process for helping customers of these departments with significant disabilities to secure SSA disability benefits. Based on a triage assessment by DVR counselors, appropriate candidates are referred to our partner organization, VABIR, for assistance to prepare for and complete the application and appeals process. The customer's connection with DVR and Benefits Counseling services is also established, to keep the door open for employment.

- *Vermonters Served in SFY2013:* 348 people were successful in obtaining Social Security disability benefits with our assistance.
- *General Assistance Savings in SFY2013:* The Social Security Application Assistance Program has enabled the State to recoup over \$385,000 from SSA for General Assistance benefits that had been paid.

Benefits Counseling Program: Vermont is a leader in promoting employment among SSA beneficiaries who have the most serious disabilities and face the greatest disincentives to working. DVR has dedicated benefits counselors who advise Social Security Administration (SSA) benefit recipients on available work incentive programs and help them manage benefits as they transition into

employment, increase their income and gradually reduce their dependence on public benefits.

The Vermont DVR Benefits Counseling program also operates as a Work Incentives Planning and Assistance (WIPA) Program. WIPA is an SSA program providing work incentives counseling to SSA beneficiaries with disabilities with an interest in pursuing employment. Services under WIPA are delivered by a nationwide network of providers, including DVR.

- *Vermonters Served in FFY2013:* 1,569 people were served, including 530 new enrollees. Another 128 individuals received brief information and referral services, without having a case opened.
- *Highlight:* Vermont DVR continues to participate in the SSA Benefit Offset National Demonstration (BOND) as part of a consortium of providers in the Northern New England region. BOND is based on an earlier Benefit Offset Pilot Demonstration in which Vermont DVR is also participating that allows a gradual reduction of SSA disability benefits for beneficiaries who go to work instead of the “cash cliff”, which results in a sudden elimination of benefits when a person earns even one dollar over SSA’s income threshold.
 - Vermont Staff have provided Enhanced Work Incentive Counseling to 67 people and basic Work Incentive Counseling to 102 participants in the Demonstration since the project’s inception in FFY2012.

Vermont Assistive Technology Program (VATP):

Assistive Technology (AT) refers to devices or strategies intended to provide access and increased independence for people with disabilities. AT can be low or high-tech and includes a variety of tools - from adapted doorknobs and weighted eating utensils to captioned telephones, specialized software, and iPad applications. The VATP carries out the functions of the Federal Assistive Technology Act. The program’s mission is to increase access and acquisition of AT, and to promote policies and practices to ensure AT is available to Vermonters. VATP serves individuals of all ages with disabilities, family members, educators, employers, rehabilitation professionals, and others supporting AT users. Services include information and assistance; alternative funding options for the purchase of AT; public awareness activities; hands-on demonstrations; short and long term equipment loans; AT device and services training; equipment reuse and recycling; technical assistance to organizations; advocacy and information about rights to AT services; and assistance with statewide activities that increase access to AT.

This year, the VATP assisted in identifying Assistive Technology software, which was installed on updated Consumer Work Stations in each VR regional office. This

software and the updated computer is intended to provide counselors and employment staff with readily available tools for assisting consumers in considering the use of AT to meet their employment goals. An example of the use of the Consumer Work Station involved a VABIR Employment Specialist who was able to assist a consumer in securing employment. The consumer, who experienced multiple brain injuries, had the opportunity to return to a job teaching a course on truck driving at a regional tech center. The consumer was certainly capable of performing the job, but needed to pass the CDL exam in order to qualify for the position. He experienced difficulty passing the CDL exam due to cognitive processing barriers resulting from his injuries. A VATP Access Specialist provided him with a digital version of the CDL manual as MP3 files so he could access the manual audibly instead of relying on reading the text manually. The employment specialist had the consumer use the Consumer Work Station in the VR regional office to listen to the MP3 version of the CDL, as the consumer was unable to access them at home. The consumer has already passed two of the three tests, and is about to take the third. The employment specialist stopped by to thank the AT Access Specialist, stating that the MP3 files and CWS made the difference.

- *Vermonters Served in FFY2013:*
 - VATP reached 12,315 people through public awareness activities, newsletters, and webinars.
 - VATP trained 264 individuals on specific AT devices and services.
 - The program provided information and assistance to 874 Vermonters on Assistive Technology tools, services and funding, conducted device demonstrations to 332 participants, and loaned 528 pieces of equipment to facilitate informed decision making on AT across the state.
- *Assistive Technology Database:* VATP implemented a new data base this year, AT4All Vermonters (vt.at4all.com). This database not only assists with accurate equipment inventory management and federal data reporting, but also provides the public with a web-based tool to view all equipment that is available for loan, rental, or demonstration. The database provides the public with the ability to search for tools from each of our regional tryout centers (Rutland, Montpelier, and Burlington), sort by category of use, and request loans online. Equipment loans are shipped to consumers using UPS and return shipping is also covered by the VATP, allowing those in rural areas or with limited ability to travel full access to the loan program.

Vermont Assistive Technology Reuse Project: Since 2008, a major focus for VATP has been facilitating equipment recycling through its Assistive Technology Reuse Project, a partnership with the Vermont Family Network. The project helps

maximize availability and affordability of AT for Vermonters and extend the useful life of AT devices. It has three components:

Vermont Community Exchange - GetATstuff website (www.getATstuff.com) is part of a regional web-based exchange program bringing together owners of AT that is no longer needed with people who are seeking new or used AT devices for themselves or others.

Vermont AT School Exchange (www.Vermont.ATschoolswap.com) is a similar web exchange for public school districts that helps them buy, sell, and share AT equipment that was purchased for Vermont students and is no longer being used. Currently, 50 of the 60 Supervisory Unions/Districts are participating, with potential for significant savings.

The Medicaid Equipment Reuse Project focuses on reuse of communication devices and specific durable medical equipment, such as wheelchairs, hospital beds, standers and lifts. Equipment is labeled by vendors, and beneficiaries of the equipment agree to return it to Medicaid when no longer needed.

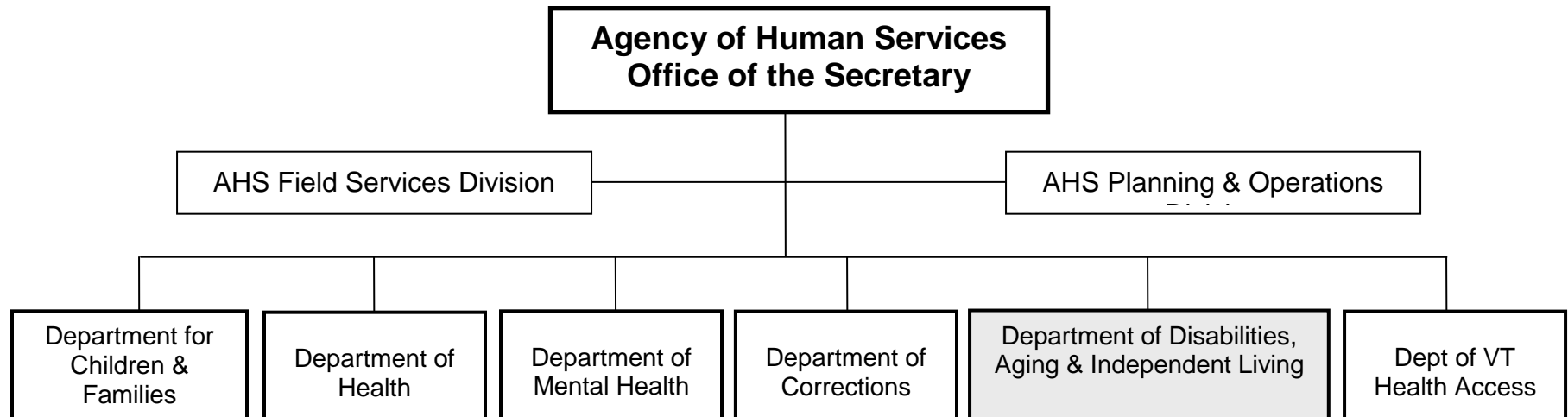
- *Savings:* Vermont has continued to be a leader in New England in Reuse activities. Having a dedicated coordinator for this project allows Vermonters to receive individualized support in obtaining equipment to maintain their independence. Community Exchange activities in FFY 13 resulted in over \$300,000 in savings for Vermonters and over \$80,000 in savings from Medicaid Equipment Retrieval.
- *iPad Rentals:* The VATP has begun a specialized iPad rental program, which provides professionals with the ability to rent an iPad set up as a dedicated Speech Generating Device. The purpose of the rental is for Speech and Language Pathologists to supervise Alternative and Augmentative Communication trials with Medicaid beneficiaries in order to receive Medicaid funding for the iPad. The VATP has become a specialized Durable Medical Equipment vendor in order for the cost of the rental to be covered by Medicaid versus an out-of-pocket expense for consumers or Speech and Language Pathologists.

Vermont Employee Assistance Program (EAP): Many people with disabilities are already working. When personal or workplace problems arise that pose a challenge to continued employment, the Employee Assistance Program (EAP) provides people with immediate access to confidential help to ensure their continued success in employment. Employers widely embrace the program statewide, particularly because it helps all of their employees—not only those with

disabilities—ensuring a healthy and productive workforce. The EAP greatly improves DVR’s relationships with employers in the private sector. The program’s prevention-oriented focus also minimizes employee stress and accidents and thus prevents disabilities and chronic illness.

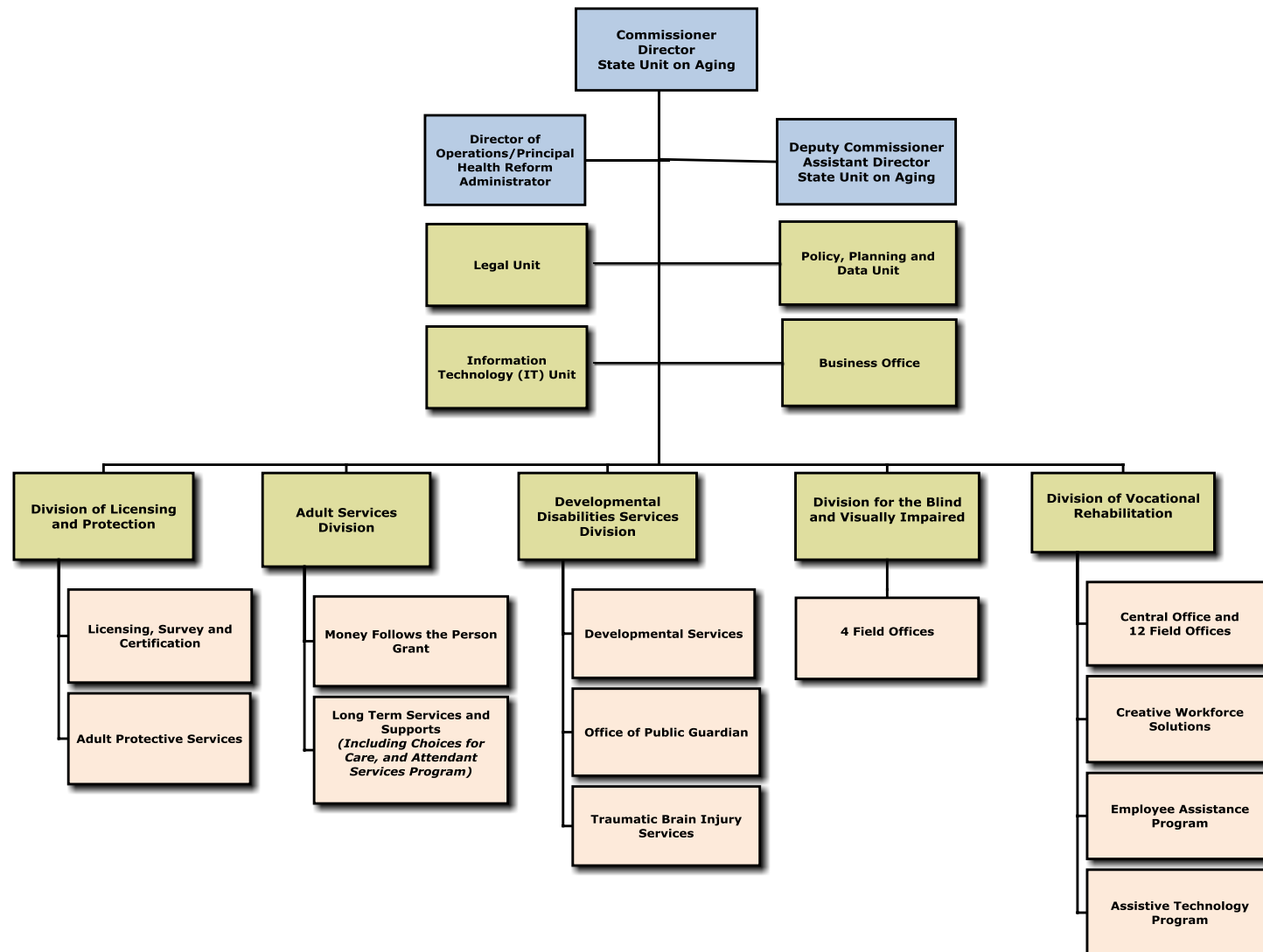
- *Vermonters Served:* Over 6,000 employees and family members obtained EAP services in SFY2013, including:
 - 2,978 people were provided individual counseling.
 - 473 managers benefited from workplace consultations.
 - 240 people attended critical incident debriefings following trauma in the workplace.
 - 3,189 attended wellness workshops.
 - 420 supervisors attended 33 supervisor trainings.
 - 711 employees attended 15 health fairs.
 - Over 1,300 members accessed resources on our website.

***ORGANIZATIONAL CHART
AGENCY OF HUMAN SERVICES***



Department of Disabilities, Aging, and Independent Living (DAIL) Organizational Chart

State Unit on Aging (SUA)



As of 07/01/2013



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This report is available in alternative formats upon request.